	383		
1	JASON BLUMBERG, NY State Bar No. 4055257		
2	Trial Attorney		
3	ANTONIA G. DARLING, State Bar No. 76190 Assistant United States Trustee		
	UNITED STATES DEPARTMENT OF JUSTICE		
4	Office of the United States Trustee		
5	501 "I" Street, Suite 7-500		
	Sacramento, CA 95814-2322		
6	(916) 930-2100 / Fax (916) 930-2099 Antonia.Darling@usdoj.gov		
7	Jason.blumberg@usdoj.gov		
8			
9	Attorneys for United States Trustee,		
9	Region 17, Tracy Hope Davis		
10	UNITED STATES BANKRUP	PTCY COURT	
11			
12	EASTERN DISTRICT OF C.	ALIFORNIA	
13			
14	In re: Case	e No. 16-2213	4-D-7
15			
16		No.: UST-1	
10	STANLEY MAYFIELD,	1. 15.00	1.6
17		e: June 15, 20	16
18		e: 10:00 a.m.	
19	·	ot.: D ortroom: 34	
	Debtor. Cou	11100III. 34	
20			
21	EXHIBITS TO MOTION OF THE UNIT		CRUSTEE
22	FOR IMPOSITION OF SA	ANCTIONS	
	Attached hereto are the following exhibits to the	motion of the U	nited States Trustee for
23			
24	imposition of sanctions, filed herewith:		
25			
26		Beginning	Number of
	Exhibit No.: Description of Document:	at Page No.:	Pages in Length:
27	1. Petition, Schedules and Statements	3	46
28	(docket no. 1 in Case No. 16-22134-D-7)	-	
	<u> </u>		

Case 16-22134 Filed 05/03/16 Doc 15

1	2.	Petition, Schedules and Statements (docket no. 1 in Case No. 16-22021-	C-7)	49	43
2					
3	3.	Petition, Schedules and Statements		92	45
4		(docket no. 1 in Case No. 16-22022-	A-7)		
	4.	Petition, Schedules and Statements		137	49
5	7.	(docket no. 1 in Case No. 16-22023-	C-7)	137	7)
6					
7	5.	Emails (4/7/16)		186	3
8	6.	Responsive Documents (received 4/7)	7/16)	189	191
9	0.	responsive Bocuments (received 4//	(/10)	10)	171
10	7.	Debtor's Declaration		380	4
11					
12					
13		Executed at Sacramento, California, on this	3 rd day of Ma	ov 2016	
14		Executed at Sacramento, Camorina, on this	3 day of Ma	.y, 2010.	
15			Respectfully s	submitted,	
16			TRACY HOP	E DAVIS	
17			UNITED STA	ATES TRUSTE	ΞE
18					
19			By: /s/ Jason]		
20			JASON BLUI	MBERG	
21				United States T	Frustee
22			501 "I" Street Sacramento, O	c, Suite 7-500 CA 95814-2322	2
23			Direct Phone:	(916) 930-207	
			Fax: (916) 93 E-mail: Jason	0-2099 .blumberg@us	doj.gov
24			<u> </u>		
25					
26					
27					
28					

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	 Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
Write the name that is on your government-issued picture identification (for example, your driver's	Stanley First name	First name
license or passport).	Middle name	Middle name
Bring your picture identification to your meeting with the trustee.	Mayfield Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years	Stan Mayfield Stan Mayfield. Jr.	
Include your married or maiden names.	Stanley Mayfield, Jr.	
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4906	
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Middle name Mayfield Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number About Debtor 1: Stanley First name Mayfield Last name and Suffix (Sr., Jr., II, III) Stan Mayfield, Jr. Stanley Mayfield, Jr. Stanley Mayfield, Jr.

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Debtor 1	Mavfield.	Stanley

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
	doing business as names		
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		3157 Staysail St Sacramento, CA 95833-4421 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Sacramento County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

Debtor 1 Mayfield, Stanley Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form The chapter of the Bankruptcy Code you are 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District Case number District When Case number District When Case number 10. Are any bankruptcy cases ■ No pending or being filed by a spouse who is not filing Yes. this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ☐ Yes. No. Go to line 12.

5

bankruptcy petition.

Der	inayrieid, Stanley				Case number (if known)
Par	Report About Any Bus	sinesses \	You Own	as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a		Numb	oer, Street, City, Sta	tte & ZIP Code
	separate sheet and attach it to this petition.		Chec	k the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-fl	dicate that you are a ow statement, and fe	court must know whether you are a small business debtor so that it can set appropriate is small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure in 11
	For a definition of small	■ No.	I am ı	not filing under Cha	pter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	the hazard?	
	safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	
	- •				Number, Street, City, State & Zip Code

Debtor 1 Mayfield, Stanley

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Lam not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or makinç rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

7

Debtor 1 Mayfield, Stanley					Case number (if known)			
Par	t 6: Answer These Question	ons for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily c individual primarily for a pers			ed in 11 U.S.C.§ 101(8) as "incurred by an		
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily b for a business or investment					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you or	we that are not consum	er debts or business d	ebts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. I paid that funds will be available			is excluded and administrative expenses are		
	administrative expenses are paid that funds will be		■ No	■ No				
	available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000	0	□ 25,001-50,000		
	you estimate that you owe?	□ 50-99		□ 1,000-5,000 □ 25,001-50,000 □ 5001-10,000 □ 50,001-100,000 □ 10,001-25,000 □ More than 100,000				
		100-19		☐ 10,001-25,0	000	☐ More than100,000		
		200-9	99					
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000		1 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000	_ ' ' '	1 - \$100 million 01 - \$500 million	_ ' ' ' ' ' ' ' '		
		\$500,0	□ \$500,001 - \$1 million			La More than 400 billion		
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		01 - \$100,000		1 - \$50 million	□ \$1,000,000,001 - \$10 billion		
		_ : '	001 - \$500,000	+ / /	1 - \$100 million 01 - \$500 million	erty is excluded and administrative expenses are 25,001-50,000 50,001-100,000 More than100,000 \$500,000,001 - \$1 billion \$10,000,000,001 - \$50 billion More than \$50 billion \$500,000,001 - \$10 billion \$10,000,000,001 - \$10 billion \$10,000,000,000 - \$10 billion \$10,000,000,0		
		□ \$500,0	001 - \$1 million		01 - \$500 million			
Par	7: Sign Below							
For	you	I have exa	amined this petition, and I decl	lare under penalty of pe	rjury that the information	on provided is true and correct.		
			chosen to file under Chapter and the relief available. I understand the relief available.					
			ney represents me and I did n ined and read the notice requi			attorney to help me fill out this document, I		
		•	relief in accordance with the	•	•	•		
		understa case caux	and making a false statement, useful Mineral to \$250,000.	concealing property, or, or imprisonment for up	obtaining money or proto 20 years, or both. 1	operty by fraud in connection with a bankruptcy 18 U.S.C. §§ 152, 1341, 1519, and 3571.		
			Mayfield		Signature of Debtor	2		
		oignature	e of Debtor 1 4/4/2016					
		Executed	on		Executed on	(22 (22 (22 (22 (22 (22 (22 (22 (22 (22		
			MM / DD / YYYY		MM	/ DD / YYYY		

8

DocuSign Envelope ID: AE2AF77B-BE11-4365-9DB4-514ED8BCDD76 Hilleedt 0054 0034 1166 **D**000c 115 Debtor 1 Case number (if known) Mayfield, Stanley For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under represented by one Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. If you are not represented by an attorney, you do not need to file this page. Paul Bains 4/4/2016 Date Signature of Attorney for Debtor MM / DD / YYYY **Pauldeep Bains** Bankruptcy Law Group, PC 1851 Heritage Ln Ste 298

Email address

paulb@bankruptcylg.com

268004

Bar number & State

Sacramento, CA 95815-4923 Number, Street, City, State & ZIP Code Contact phone (916) 678-5000

9

Certificate Number: 17572-CAE-CC-027173760



CERTIFICATE OF COUNSELING

I CERTIFY that on March 24, 2016, at 4:03 o'clock PM PDT, Stanley Mayfield received from Dollar Learning Foundation, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 24, 2016 By: /s/Selin Polat

Name: Selin Polat

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill	in this inform	ation to identify your o	case:				
	otor 1	Stanley Mayfield					
		First Name	Middle Name	Last Name	 }		
1	otor 2 use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Ban	kruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENTO			
Cas	e number						
(if kno	own)						t if this is an
						amen	ded filing
Ott	isial Fam	100C					
		m 106Sum	and Liabilities an	ıd Certain Statistical Ir	formation		12/15
Be as	s complete an mation. Fill or original form	nd accurate as possiblut all of your schedule	e. If two married people a s first; then complete the	re filing together, both are equally information on this form. If you a the box at the top of this page.	responsible for	supplying (correct
Pall	Sullilla	IIIZE TOUI ASSELS				Your a	ssets f what you own
1.	Schedule A/I 1a. Copy line	B: Property (Official Fo	rm 106A/B) om Schedule A/B			\$	205,000.00
	1b. Copy line	e 62, Total personal prop	perty, from Schedule A/B			\$	26,520.08
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	231,520.08
Part	2: Summa	rize Your Liabilities					
							abilities t you owe
2.			aims Secured by Property (nn AA <i>mount of claim</i> , at the	Official Form 106D) bottom of the last page of Part 1 of S	Schedule D	\$	211,103.00
3.			Unsecured Claims (Official of the priority unsecured claims	Form 106E/F) s) from line 6e & chedule E/F		\$	4,889.40
	3b. Copy the	e total claims from Part 2	2 (nonpriority unsecured cla	aims) from line 6j o 3 chedule E/F		\$	14,691.01
				Yo	ur total liabilities	\$	230,683.41
Part	3: Summa	rize Your Income and	Expenses				
4.	Schedule I: Y	Your Income(Official Formation Monthly income	rm 106I) e from line 12 o \$ chedule I			\$	3,381.80
5.	Schedule J: 'Copy your mo	Your Expenses (Official onthly expenses from line	Form 106J) e 22c of <i>Schedule J</i>			\$	4,220.00
Part	4: Answer	These Questions for	Administrative and Statis	tical Records			
6.	-	•	er Chapters 7, 11, or 13? on this part of the form. Che	ck this box and submit this form to th	e court with your o	ther schedu	les.
7.	Yes What kind of	f debt do you have?					
				ebts are those "incurred by an individual purposes. 28 U.S.C§ 159.	ual primarily for a p	ersonal, fan	nily, or household
		ebts are not primarily of th your other schedules.	consumer debts. You have	e nothing to report on this part of the f	orm. Check this bo	ox and subn	nit this form to the

Summary of Your Assets and Liabilities and Certain Statistical Information

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Official Form 106Sum

page 1 of 2

Debtor 1 Mayfield, Stanley

Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,477.16

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	4,889.40
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total . Add lines 9a through 9f.	\$	4,889.40

,		Casse:	1109-222113344	HIEEOMAMBATEO	IN THE T	Ь		
Fill in this inform	nation to identify	your case and thi	is filing:					
Debtor 1	Stanley May							
Debtor 2	First Name	Middle	e Name	Last Name				
(Spouse, if filing)	First Name	Middle	e Name	Last Name				
United States Bar	nkruptcy Court for	the: EASTERN	DISTRICT OF C	CALIFORNIA, SACRAME	NTO DIVIS	ION		
Case number								l Check if this is ar
								amended filing
Official For		_						
<u>Schedul</u>	e A/B: P	roperty						12/15
think it fits best. Be information. If more Answer every quest	e as complete and a e space is needed, a tion.	accurate as possible attach a separate sh	e. If two married p neet to this form. (ce. If an asset fits in more t people are filing together, b On the top of any additiona ou Own or Have an Interes	both are equa al pages, wri	ally responsible f	or supply	ing correct
☐ No. Go to Part Yes. Where is								
1.1			What is the pr	roperty? Check all that apply				
3157 Stays	sail St		Single-f	family home				s or exemptions. Put aims on Schedule D:
	if available, or other des	scription		or multi-unit building minium or cooperative				Secured by Property.
Sacramen	to CA	95833-4421	☐ Manufa	actured or mobile home		Current value of the ntire property?		Current value of the portion you own?
City	State	ZIP Code		nent property		\$205,000	.00	\$205,000.00
			☐ Timesh: ☐ Other Who has an in ☐ Debtor	nterest in the property? Che	eck one		le, tenano	r ownership interest by by the entireties, or
Sacramen	to		Debtor:	•				
County			_	1 and Debtor 2 only tone of the debtors and anot	thor [Check if this i		unity property
				ation you wish to add about		•	,	
				tification number:				
			Residence)				
						Г		
				ries from Part 1, includir				\$205,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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	Donc 115	1334 FFileet1005400341166			gn Envelo _l
	Case number (if known)			ayfield, Stanley	ebtor 1
		ear, shoes, accessories	, leather coats, designer we		. Clothes Examp □ No ■ Yes.
\$200			ng	Clothi	
er		ings, wedding rings, heirloom jewe	ses	cribe nimals Dogs, cats, birds, hors cribe	■ No □ Yes. Non-far Examp ■ No □ Yes.
	aids you did not list	eady list, including any health a	old items you did not alr	personal and househ	. Any oth ■ No
				e specific information	
	you have attached for	ncluding any entries for pages	our entries from Part 3, i		
\$3,300.00	_		s	e Your Financial Assets	
\$3,300.00 Current value of the portion you own? Do not deduct secure claims or exemptions		f the following?	s quitable interest in any o	e Your Financial Assets have any legal or ec	art 4: Des
Current value of the portion you own? Do not deduct secure	nen you file your petition	safe deposit box, and on hand wh	quitable interest in any o	have any legal or ed	art 4: Des o you ow c. Cash Examp
Current value of the portion you own? Do not deduct secure	nen you file your petition Cash on Hand	safe deposit box, and on hand wh	quitable interest in any o	have any legal or ed	art 4: Des o you ow c. Cash Examp
Current value of the portion you own? Do not deduct secure claims or exemptions	Cash on Hand	safe deposit box, and on hand wh	uitable interest in any of a wallet, in your home, in a other financial accounts; co	Money you have in you f money Checking, savings, or	art 4: Deso you ow Cash Examp No Yes Deposit Examp
Current value of the portion you own? Do not deduct secure claims or exemptions	Cash on Hand edit unions, brokerage houses	safe deposit box, and on hand wh	ur wallet, in your home, in a other financial accounts; core multiple accounts with the second of th	Money you have in you f money Checking, savings, or institutions. If you have	art 4: Deso you ow Cash Examp No Yes Deposit Examp
Current value of the portion you own? Do not deduct secure claims or exemptions \$300	Cash on Hand edit unions, brokerage houses	safe deposit box, and on hand wh	ur wallet, in your home, in a other financial accounts; core multiple accounts with the second of th	Money you have in you f money Checking, savings, or institutions. If you have	art 4: Deso you ow Cash Examp No Yes Deposit Examp
Current value of the portion you own? Do not deduct secure claims or exemptions \$300 and other similar	Cash on Hand edit unions, brokerage houses	safe deposit box, and on hand when the same institution, list each. Navy Federal Credit Union	ur wallet, in your home, in a other financial accounts; cover multiple accounts with the checking Account	Money you have in you f money Checking, savings, or institutions. If you have	art 4: Deso you ow Cash Examp No Yes Deposit Examp

Official Form 106A/B Schedule A/B: Property page 3

Chevron Federal Credit Union ... 896

17.5. Savings Account

\$20.00

portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Schedule A/B: Property page 4 Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com

Official Form 106A/B

Official Form 106A/B Schedule A/B: Property page 5

DocuSign Envelope ID: AE2AF77B-BE11-4365-9DB4-514ED8BCDE

Debtor 1 Case number (if known) Mayfield, Stanley 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$205,000.00 Part 2: Total vehicles, line 5 \$7,077.00 57. Part 3: Total personal and household items, line 15 \$3,300.00 Part 4: Total financial assets, line 36 \$16,143.08 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total 62. \$26,520.08 \$26,520.08 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$231,520.08

Official Form 106A/B Schedule A/B: Property page 6

Vehicle Appraisal

Page 1 of 1



DATE: 3/30/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

VEHICLE INFORMATION:

YEAR: 2013 CONDITION: Average

MAKE: Nissan MILEAGE: 92000

MODEL: Altima ZIP CODE: 95833

STYLE: 2.5 4dr Sedan (2.5L 4cyl CVT)

OPTIONS:

RETAIL

TRADE IN

PRIVATE PARTY

Edmunds.com TMV®

\$8,193.00

\$5,848.00

\$7,077.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any options. (If no Zip Code was provided, this price is the national price.)

DATA PROVIDED BY



Debtor 2	tanley Mayfield st Name	Middle Name	Last Name	
Debtor 2		Middle Name	Last Name	
	st Name			,
(Spouse if, filing) Firs	st Name			
		Middle Name	Last Name	
United States Bankrupt	tcy Court for the:	EASTERN DISTRICT C	OF CALIFORNIA, SACRAMENTO	
Case number				☐ Check if th
(ii kilowii)				amended

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exemp	t
--	---

1	Which set of exemptions a	ra vau alaimina?	Chook one only	avan if vaur a	navaa ia filina with way
Ι.	vinich sei of exemplions a	e vou cialillillu (CHECK OHE OHIV.	. even ii voni si	JOUSE IS HIIITO WITH VOI

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemptio	
Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
\$205,000.00		\$10,583.00	CCCP § 703.140(b)(1)	
		100% of fair market value, up to any applicable statutory limit		
\$1,000.00		\$1,000.00	CCCP § 703.140(b)(3)	
		100% of fair market value, up to any applicable statutory limit		
\$2,000.00		\$2,000.00	CCCP § 703.140(b)(3)	
		100% of fair market value, up to any applicable statutory limit		
\$100.00	•	\$100.00	CCCP § 703.140(b)(3)	
		100% of fair market value, up to any applicable statutory limit		
****		\$200.00	CCCP § 703.140(b)(3)	
\$200.00		\$200.00	• (), (
	\$205,000.00 \$1,000.00 \$2,000.00	\$205,000.00	Copy the value from Schedule A/B \$205,000.00 \$100% of fair market value, up to any applicable statutory limit \$1,000.00 \$1,000.00 \$2,000.00 \$2,000.00 \$100% of fair market value, up to any applicable statutory limit	

Official Form 106C

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash on Hand Line from Schedule A/B 16.1	\$300.00		\$300.00	CCCP § 703.140(b)(5)
				100% of fair market value, up to any applicable statutory limit	
	Navy Federal Credit Union 6747	\$0.00			CCCP § 703.140(b)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Navy Federal Credit Union 4741 Line from Schedule A/B 17.2	\$0.00			CCCP § 703.140(b)(5)
	Line nom Schedule A/B. 17.2			100% of fair market value, up to any applicable statutory limit	
	Capital One 079 Line from Schedule A/B 17.3	\$50.00		\$50.00	CCCP § 703.140(b)(5)
	Line Holli Schedule A/B. 17.3			100% of fair market value, up to any applicable statutory limit	
	Chase 5693 Line from Schedule A/B 17.4	\$500.00		\$500.00	CCCP § 703.140(b)(5)
	Line Iron Schedule A/L 17.4			100% of fair market value, up to any applicable statutory limit	
	Chevron Federal Credit Union 896 Line from Schedule A/B 17.5	\$20.00		\$20.00	CCCP § 703.140(b)(5)
	Line Iron Schedule A/L 17.3			100% of fair market value, up to any applicable statutory limit	
	Thrift Savings Plan through Employer	\$15,273.08		\$15,273.08	CCCP § 703.140(b)(10)(E)
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 your No			on or after the date of adjustment.)	
	Yes. Did you acquire the property covered No	by the exemption within	n 1,21	5 days before you filed this case?	
	☐ Yes				

Fill in this informa	ation to identify you	r case:				
Debtor 1	Stanley Mayfiel		Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name Last	Name			
United States Bank	kruptcy Court for the:	EASTERN DISTRICT OF CALIFORN DIVISION	IIA, SACRAMEN	ТО		
Case number						
(if known)					_	if this is an
					amend	ed filing
Official Form	106D					
Schedule [D: Creditors	Who Have Claims Sec	cured by I	Propert	У	12/15
needed, copy the Add known).	ditional Page, fill it out	f two married people are filing together, bot , number the entries, and attach it to this for				
•	ave claims secured by			.:		
_		is form to the court with your other schedul	es. You nave noth	ning eise to re	port on this form.	
	III of the information be	elow.				
	Secured Claims		Colum	nn A	Column B	Column C
for each claim. If mor much as possible, list	re than one creditor has the claims in alphabetic	nore than one secured claim, list the creditor se a particular claim, list the other creditors in Par cal order according to the creditor 's name.	t 2. As Amou Do no	int of claim it deduct the of collateral.	Value of collateral that supports this claim	Unsecured portion
2.1 Cenlar Loa Reporting		Describe the property that secures the cla	im: \$19	94,417.00	\$205,000.00	\$0.00
Creditor's Name	(Oemai)	3157 Staysail St, Sacramento, Co 95833-4421 Residence	A	<i>,</i>		
425 Phillips	s Blvd	As of the date you file, the claim is: Check a apply.	all that			
Ewing, NJ	08618-1430	Contingent				
Number, Street, C	City, State & Zip Code	Unliquidated				
Who owes the debt	t? Check one.	☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as mortga	ge or secured			
Debtor 2 only		car loan)				
Debtor 1 and Debt	tor 2 only	☐ Statutory lien (such as tax lien, mechanic	s lien)			
At least one of the		Judgment lien from a lawsuit				
☐ Check if this clair community debt		Other (including a right to offset) First	t Mortgage			
Date debt was incur	red	Last 4 digits of account number	2777			
Navy Feder	ral Credit	Describe the property that secures the cla	im: \$	16,686.00	\$7,077.00	\$9,609.00
Creditor's Name		2013 Nissan Altima 2.5 4dr Seda (2.5L 4cyl CVT)	n			
PO Box 30		As of the date you file, the claim is: Check a	all that			
Merrifield, \ 22119-3000		apply.				
	City, State & Zip Code	☐ Contingent ☐ Unliquidated				
ramoor, onco, c	only, claic a zip code	☐ Disputed				
Who owes the debt	t? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortga	ge or secured			
Debtor 2 only		car loan)				
Debtor 1 and Debt		Statutory lien (such as tax lien, mechanic	s lien)			
At least one of the		Judgment lien from a lawsuit				
Check if this clair		Other (including a right to offset)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

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Casse 116-2221344 Filed 054/034/116 Docc 115

Debto	r 1 Stanley Mayfield		Case number (f know)	
	First Name Middle Name	Last Name		
Date o	lebt was incurred	Last 4 digits of account number	3761	
If this Write	ne dollar value of your entries in Column A is the last page of your form, add the dolla that number here:	r value totals from all pages.	\$211,103.00 \$211,103.00	
Use the trying than of	is page only if you have others to be notifi to collect from you for a debt you owe to s	led about your bankruptcy for a debi someone else, list the creditor in Par sted in Part 1, list the additional cred	bt that you already listed in Part 1. For example, if a collection agency is art 1, and then list the collection agency here. Similarly, if you have more iditors here. If you do not have additional persons to be notified for any	
	Name, Number, Street, City, State & Zip Cod Central Loan Admin & R 425 Phillips Blvd Ewing, NJ 08618-1430	le	On which line in Part 1 did you enter the creditor?	
	Name, Number, Street, City, State & Zip Cod Navy Federal Cr Union PO Box 3700 Merrifield, VA 22119-3700	de	On which line in Part 1 did you enter the creditor?	

EIII	in this infor	mation to identify your o	2260:					
	otor 1		ase.					
Deb	OLOT 1	Stanley Mayfield First Name	Middle	Name	Last Name			
Deb	otor 2							
(Spot	use if, filing)	First Name	Middle	Name	Last Name			
Unit	ted States Ba	ankruptcy Court for the:	EASTERN DIVISION	DISTRICT OF C	CALIFORNIA, SACRAM	MENTO		
Cas	e number							
(if kn	own)			_			_ · · · · ·	if this is an ded filing
		m 106E/F						
Scl	hedule E	E/F: Creditors W	ho Have	Unsecure	ed Claims			12/15
any e Sche D: Cr the C case	executory con dule G: Executeditors Who I continuation P number (if kn	,	that could res ired Leases (C operty. If mor ve no informat	ult in a claim. Als Official Form 106G e space is needed tion to report in a	so list executory contrac i). Do not include any cre d, copy the Part you need	ts on Schedule A/B: Peditors with partially so d, fill it out, number the	roperty (Official Forr ecured claims that a e entries in the boxes	m 106A/B) and on re listed in Schedule s on the left. Attach
		All of Your PRIORITY Un ors have priority unsecure						
	No. Go to F		u Ciaiilis ayali	ist your				
	Yes.	art Z.						
2.	List all of you identify what ty possible, list th	r priority unsecured claims /pe of claim it is. If a claim ha ne claims in alphabetical orde one creditor holds a particul	s both priority are according to	and nonpriority ame	ounts, list that claim here a	and show both priority a	nd nonpriority amount	ts. As much as
	(For an explan	nation of each type of claim, s	ee the instructi	ons for this form in	the instruction booklet.)	Total claim	Priority amount	Nonpriority amount
2.1		I Revenue Service		ast 4 digits of ac	count number	\$4,889.40	\$4,889.40	\$0.00
	Priority C	reditor's Name	,	When was the deb	nt incurred?			
		elphia, PA 19101-734	6				-	
		Street City State Zlp Code ed the debt? Check one.	_	_	I file, the claim is: Check	all that apply		
	_			☐ Contingent				
	Debtor 1	•		Unliquidated				
	Debtor 2	only		Disputed				
	☐ Debtor 1	and Debtor 2 only			unsecured claim:			
	☐ At least o	ne of the debtors and anothe	er L	Domestic suppo	ort obligations			
	☐ Check if	this claim is for a commur	•		ain other debts you owe the	•		
		subject to offset?			n or personal injury while y	ou were intoxicated		
	■ No		I	Other. Specify				-
	☐ Yes							
Par	t 2: List A	All of Your NONPRIORIT	Y Unsecured	l Claims				
3.	Do any credit	ors have nonpriority unsec	ured claims a	gainst you?				
	☐ No. You ha	ave nothing to report in this pa	art. Submit this	form to the court w	with your other schedules.			
	Yes.	3			,			
	unsecured clai	r nonpriority unsecured cla im, list the creditor separately tor holds a particular claim, li	for each claim	n. For each claim lis	sted, identify what type of	claim it is. Do not list cla	ims already included i	in Part 1. If more
							Tota	al claim

Official Form 106 E/F

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Casse 16-7221344 Filert 054/034/1166 Docc 15

Debtor	¹ Mayfield, Stanley	Case number (f know)	
4.1	Bankcard Services Nonpriority Creditor's Name	Last 4 digits of account number	\$797.73
	,	When was the debt incurred?	
	PO Box 4477		
	Beaverton, OR 97076-4401 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Capital One	Last 4 digits of account number 7548	\$993.00
	Nonpriority Creditor's Name Attn: Bankruptcy PO Box 30285	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	Citibank/the Home Depot	Last 4 digits of account number 1771	\$586.00
	Nonpriority Creditor's Name Citicorp Credit Srvs/Centralized Bankrup	When was the debt incurred?	
	PO Box 790040 Saint Louis, MO 63179-0040 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community debt	_	
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		Other. Specify	

Debto	Mayfield, Stanley	Case number (f know)	
4.4	Navy Federal Cr Union Nonpriority Creditor's Name	Last 4 digits of account number 2194	\$12,155.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 3700		
	Merrifield, VA 22119-3700		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		_	
	Yes	Other. Specify	
4.5	Traeger Grills LLC	Last 4 digits of account number	\$159.28
	Nonpriority Creditor's Name	When was the debt incurred?	
	Dept 3368 PO Box 123368	when was the debt incurred?	
	Dallas, TX 75312-3368		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
Part 3	List Others to Be Notified About a De	ebt That You Already Listed	
	•	about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example	if a collection agency
is try	ing to collect from you for a debt you owe to	someone else, list the original creditor in Parts 1 or 2, then list the collection agency h	ere. Similarly, if you
	more than one creditor for any of the debts the debts to debts in Parts 1 or 2, do not fill out	nat you listed in Parts 1 or 2, list the additional creditors here. If you do not have addit or submit this page.	ional persons to be
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Capit	al One Bank USA N	Line 4.2 of (Check one):	ıs
	Capital One Dr	Part 2: Creditors with Nonpriority Unsecured C	laims
Richr	mond, VA 23238-1119	Last 4 digits of account number 7548	
		Last 4 digits of account number 7546	
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
•	rtment of Justice	Line 2.1 of (Check one):	s
	Division Ben Franklin Station ox 683	☐ Part 2: Creditors with Nonpriority Unsecured C	laims
	nington, DC 20044-0683		
	5 . ,	Last 4 digits of account number	
Name s	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Thd/C		Line 4.3 of (Check one):	IS .
РО В	ox 6497	■ Part 2: Creditors with Nonpriority Unsecured C	
Sioux	c Falls, SD 57117-6497		
		Last 4 digits of account number 1771	
Name a	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	

Official Form 106 E/F

Debtor 1 Mayfield, Stanley _____ Case number (f know)

US Attorney (For IRS) 501 I St Ste 10-100 Sacramento, CA 95814-7300 Line 2.1 of (Check one):

Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	4,889.40
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	4,889.40
					Total Claim
Tatal alaima	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	14,691.01
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	14,691.01

Fill in this infor	mation to identify your	case:		
Debtor 1	Stanley Mayfield			
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENT	то
Case number				
(if known)				☐ Check if this is ar amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1		rame, ramber	, otroot, only, otato and zin		
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.3	Oity		Oldio	Zii Codo	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

DocuSign Envelope ID: AE2AF77B-BE11-4365-9DB4-514ED8BCDD764

Casse 160-22213344 Filed 054/054/1166 Docc 15

Fill in this	is informati	ion to identify your	2260			
			.ase.			
Debtor 1	-	Stanley Mayfield First Name	Middle Name	Last Name		
Debtor 2					(
(Spouse if, fi	filing)	First Name	Middle Name	Last Name		
United St	tates Bankr	uptcy Court for the:	EASTERN DISTRICT OF DIVISION	CALIFORNIA, SACRA	MENTO	
Case nun	mher					
(if known)						Check if this is an amended filing
Officia	al Form	n 106H				
Sched	dule H	: Your Cod	ebtors			12/15
are filing t and numb case num	together, b ber the enti ber (if kno	oth are equally respries in the boxes on wn). Answer every c	onsible for supplying corre the left. Attach the Addition	ect information. If mo nal Page to this page.	re space is needed, co On the top of any Add	as possible. If two married people py the Additional Page, fill it out, itional Pages, write your name and
■ No	•	,	ou a.og a jo ouce, uo .	or not ourse. opened ac		
■ No						
	55					
			lived in a community prop New Mexico, Puerto Rico, T			states and territories include Arizona,
□ No	o. Go to line	3.				
_			se, or legal equivalent live with	you at the time?		
	,	эрэлээ, гэллэг эрээл	,9	, ,		
	■ No					
	☐ Yes.					
	In w	hich community state	or territory did you live?	-NONE-	. Fill in the name an	d current address of that person.
	Nam	e of your spouse, former sp	ouse or legal equivalent			
		ber, Street, City, State & Zip				
line 2 106D	2 again as	a codebtor only if th	at person is a guarantor or	cosigner. Make sure	you have listed the cre	vith you. List the person shown in editor on Schedule D (Official Forr e E/F, or Schedule G to fill out
		Your codebtor per, Street, City, State and Z	IP Code		Column 2: The cree Check all schedule	ditor to whom you owe the debt s that apply:
3.1					☐ Schedule D, line	
<u> </u>	Name				_ ☐ Schedule E/F, li	
					☐ Schedule G, line	
	Number	Street			_	
	City		State	ZIP Code		
					Cohedula D. Co	
3.2	Name				_ ☐ Schedule D, line ☐ Schedule E/F, li	
					☐ Schedule G, line	
	Number	Street			_	
	City	2001	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com Schedule H: Your Codebtors

Fill	in this information to iden	tify your case:							
Del	otor 1 Sta	nley Mayfield							
_	otor 2								
Uni	ted States Bankruptcy Co	ourt for the: EASTERN DISTRIC SACRAMENTO DIV	CT OF CALIFORNIA, /ISION						
	se number nown)		_		A				oter 10
0	fficial Form 106	<u> </u>			- N	1M / DD/ Y	YYY		
S	chedule I: You	ır Income				, 22, .			12/1
sup spo atta	plying correct informations. Use. If you are separated	e as possible. If two married per on. If you are married and not fil d and your spouse is not filing v nis form. On the top of any addit	ling jointly, and your s vith you, do not includ	spouse is liv le informatio	ing with yon about y	ou, includ our spous	le information se. If more spa	about your ace is neede	d,
1.	Fill in your employment information.	nt	Debtor 1			Debtor 2	or non-filing	spouse	
	If you have more than or		■ Employed	■ Employed			☐ Employed		
	attach a separate page v information about additi		☐ Not employed	☐ Not employed			☐ Not employed		
	employers.	Occupation	Machine Opera	Machine Operator					
	Include part-time, seaso self-employed work.	enal, or Employer's name	Department of	Treasury					
	Occupation may include homemaker, if it applies	e student or Employer's address s.	155 Hermann S San Francisco,		!				
		How long employed	there? 6 years	s and 3 mc	onths	_			_
Par	t 2: Give Details A	bout Monthly Income							
unle	ss you are separated.	s of the date you file this form.	,	·		·	·	· ·	
	ce, attach a separate sheet			, ,,,,				,	
					For Dek	otor 1	For Debtor non-filing s		
2.		ges, salary, and commissions (monthly, calculate what the month		2.	\$4	745.87	\$	N/A	
3.	Estimate and list mont	thly overtime pay.		3. +9	\$	0.00	+\$	N/A	
4.	Calculate gross Incom	e. Add line 2 + line 3.		4.	\$ 4,74	15.87	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Mayfield, Stanley	_	Case	number (if known)			
				For	Debtor 1	For Debto non-filing	spouse	
	Cop	y line 4 here	4.	\$_	4,745.87	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	1,183.24	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A	
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$ \$	180.83	\$ 	N/A	
	5f.	Domestic support obligations	5e. 5f.	\$_	0.00	\$	N/A N/A	
	5g.	Union dues	5g.	*-	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	· · · —		+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	1,364.07	\$	N/A	
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,381.80	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A	
	8e.	Social Security	8e.	\$_	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	— 8g.	\$_	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$_	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,381.80 + \$_	N/A	3,3	381.80
11.	Incluothe Do r	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your during friends or relatives. The provided in lines 2-10 or amounts that are not avoid the contributions of the contributions.	ependen		·	Schedule J.	T.Q.	0.00
	Spe	Ciry.				11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain						881.80
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?				Combined monthly inc	come
	$\overline{}$	Yes, Explain:						

Schedule I: Your Income

Official Form 106I

page 2

GHI-	in this information to identify your server.				
	in this information to identify your case:				
Deb	Stanley Mayfield			k if this is: An amended filing	
	otor 2			A supplement show	ing postpetition chapter 13
(Spo	ouse, if filing)		•	expenses as of the	following date:
Unit	ted States Bankruptcy Court for the: EASTERN DISTRICT OF CA SACRAMENTO DIVISION	ALIFORNIA,	ī	MM / DD / YYYY	
	se number known)				
O	fficial Form 106J				
S	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married peoplormation. If more space is needed, attach another sheet to t known). Answer every question.				
Par 1.	rt 1: Describe Your Household Is this a joint case?				
••	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, Exper	nses for Separate Househ	oldof Debtor	2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.	Son		4	Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
					□ No
•					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				
Par					
exp	timate your expenses as of your bankruptcy filing date unle penses as of a date after the bankruptcy is filed. If this is a s plicable date.				
	clude expenses paid for with non-cash government assistan lue of such assistance and have included it on Schedule I: Y				
(Of	fficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your resident payments and any rent for the ground or lot.	ce. Include first mortgage	4. \$		1,300.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	Home maintenance, repair, and upkeep expenses Homeowner's association or condominium dues		4c. \$		130.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such a 	s home equity loans	4d. \$ 5. \$		<u>60.00</u> 0.00

Official Form 106J Schedule J: Your Expenses page 1

ebtor 1	Mayfield, Stanley	ase num	ber (if known)	
1 14:1:4:				
Utilitie 6a.	Electricity, heat, natural gas	6a.	\$	78.00
	Water, sewer, garbage collection	6b.	·	165.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.	· : ————	179.00
	Other. Specify: Security	6d.	·	
	and housekeeping supplies	- ^{60.} 7.	•	104.00
	. •		·	500.00
	care and children's education costs	8.	·	0.00
	ing, laundry, and dry cleaning	9.	·	75.00
	nal care products and services	10.	· —	100.00
	al and dental expenses	11.	\$	50.00
	portation. Include gas, maintenance, bus or train fare.	12.	\$	300.00
	t include car payments. tainment, clubs, recreation, newspapers, magazines, and books	13.	·	150.00
	table contributions and religious donations	14.	·	
Insura	•	14.	Ψ	0.00
	t include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	·	120.00
	Other insurance. Specify:	15d.	·	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.		Ψ	0.00
	y: Tax Payments	16.	\$	100.00
	ment or lease payments:			100.00
	Car payments for Vehicle 1	17a.	\$	409.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	- 17d.	·	0.00
	payments of alimony, maintenance, and support that you did not report as	_ 17 u.	Ψ	0.00
	sted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	400.00
	payments you make to support others who do not live with you.		\$	0.00
Specif		19.		
•	real property expenses not included in lines 4 or 5 of this form or on Schedul	e I: You	ır Income.	
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
	: Specify:		+\$	0.00
	· · · -			0.00
	late your monthly expenses			
	dd lines 4 through 21.		\$	4,220.00
22b. C	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	4,220.00
Calari	late your monthly not income			
	late your monthly net income. Copy line 12 (your combined monthly income) from Schedule I.	23a.	¢	2 204 00
	Copy your monthly expenses from line 22c above.	23a. 23b.	·	3,381.80
230.	Copy your monthly expenses from line 22c above.	230.	- p	4,220.00
230	Subtract your monthly expenses from your monthly income			
	Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	-838.20
	The result is your monthly net income.			
Do vo	u expect an increase or decrease in your expenses within the year after you fi	le this f	form?	
For exa	ample, do you expect to finish paying for your car loan within the year or do you expect your m			or decrease because of a
modific	ation to the terms of your mortgage?			
■ No				
☐ Yes	s. Explain here:			

Yes.	Explain her
------	-------------

page 2

Fill in this infor	mation to identify your	case:			
Debtor 1	Stanley Mayfield				
	First Name	Middle Name	Last Name		
Debtor 2	-				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C DIVISION	OF CALIFORNIA, SACRAMEN	ITO	
Case number					
(if known)					☐ Check if this is an amended filing
If two married po	eople are filing together	, both are equally respon le bankruptcy schedules n connection with a bank	sible for supplying correct in or amended schedules. Make ruptcy case can result in fine	nformation.	
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attorr	ney to help you fill out bankı	ruptcy forms?	
■ No					
☐ Yes.	Name of person				ptcy Petition Preparer's Notice, nd Signature (Official Form 119)
that they are X Stanie Signatu	alty of perjury, I declare the divided and correct. May May industries of Debtor 1 4/4/2016	that I have read the sumr	mary and schedules filed wit X Signature of Del		nd
Date _			Date		

Date _____

Bankcard Services
PO Box 4477
Beaverton, OR 97076-4401

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285

Capital One Bank USA N 15000 Capital One Dr Richmond, VA 23238-1119

Cenlar Loan Admin & Reporting (Cenlar) 425 Phillips Blvd Ewing, NJ 08618-1430

Central Loan Admin & R 425 Phillips Blvd Ewing, NJ 08618-1430

Citibank/the Home Depot Citicorp Credit Srvs/Centralized Bankrup PO Box 790040 Saint Louis, MO 63179-0040

Department of Justice Tax Division Ben Franklin Station PO Box 683 Washington, DC 20044-0683 Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Navy Federal Cr Union PO Box 3700 Merrifield, VA 22119-3700

Navy Federal Credit Union PO Box 3000 Merrifield, VA 22119-3000

Thd/Cbna PO Box 6497 Sioux Falls, SD 57117-6497

Traeger Grills LLC Dept 3368 PO Box 123368 Dallas, TX 75312-3368

US Attorney (For IRS) 501 I St Ste 10-100 Sacramento, CA 95814-7300

Fill in this info	rmation to identify you				
	rmation to identify you				
Debtor 1	Stanley Mayfield First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	EASTERN DISTRICT OF DIVISION	CALIFORNIA, SACRAMEN	то	
Case number					
(if known)					Check if this is an amended filing
Be as complete	nt of Financial	Affairs for Individual on the second of the	re filing together, both are e	equally responsible for sup	
(if known). Ans	wer every question.	·		additional pages, write yo	ur name and case number
Part 1: Give	Details About Your Ma	rital Status and Where You	Lived Before		
1. What is yo	our current marital statu	s?			
☐ Marrie ■ Not m	ed narried				
2. During the	e last 3 years, have you	lived anywhere other than v	where you live now?		
□ No		-	-		
	ist all of the places you liv	ved in the last 3 years. Do not	include where you live now.		
Debtor 1 l	Prior Address:	Dates Debtor 1 there	lived Debtor 2 Prior Ad	ddress:	Dates Debtor 2
9794 Els Elk Grov	ston Cir ve, CA 95757-6279	From-To: 2011 - 4/2014	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
No Yes. M Part 2 Expl 4. Did you ha	ories include Arizona, Cal	nployment or from operating	vada, New Mexico, Puerto Ri icial Form 106H). g a business during this ye	co, Texas, Washington and	Wisconsin.)
If you are fi		u received from all jobs and a lave income that you receive to			
□ No ■ Yes. F	Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Official Form 107

Mayfield, Stanley Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and Check all that apply. (before deductions Check all that apply. exclusions) and exclusions) From January 1 of current year until \$11,623.20 ☐ Wages, commissions, ■ Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a business Operating a business For last calendar year: \$52,737.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. П No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until 2016 Tax Refund \$1,290.00 the date you filed for bankruptcy: from 2015 Tax Return Fed: \$0.00 State: \$1,290 For last calendar year: 2015 - Pension: \$5,617.00 (January 1 to December 31, 2015) \$1.300 2015 Tax Refund from 2014 Tax Return Fed: \$2,876 State: \$1,441 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? ☐ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? \square No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Case number (if known)

Official Form 107

Debtor 1

Del	btor 1	Mayfield, Stanley		Cas	e number (if known)		
	Credi	tor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
7.	Insider which	1 year before you filed for bankruptcy is include your relatives; any general partny you are an officer, director, person in cont ss you operate as a sole proprietor. 11 U.S.	ers; relatives of any general rol, or owner of 20% or more	partners; partnership e of their voting secu	os of which you are rities; and any mana	a general partr aging agent, inc	er; corporations of luding one for a
	■ No□ Yes. List all payments to an insider.						
	Inside	er's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
8.	inside	n 1 year before you filed for bankruptcy r? e payments on debts guaranteed or cosign		nents or transfer an	y property on acc	count of a deb	that benefited an
	■ N	o es. List all payments to an insider					
	Inside	er's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment tor's name
Par	rt 4:	Identify Legal Actions, Repossessions	s. and Foreclosures				
9.	List all and co	 1 year before you filed for bankruptcy such matters, including personal injury can ntract disputes. o es. Fill in the details. 					
	Case Case	title number	Nature of the case	Court or agency		Status of the	case
10.	Check	all that apply and fill in the details below to. Go to line 11. es. Fill in the information below.		rty repossessed, for	reclosed, garnisho	ed, attached, s	eized, or levied?
	Credi	tor Name and Address	Describe the Property Explain what happened		Date		Value of the property
 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 				ounts from your			
		tor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
12.	court-	a 1 year before you filed for bankruptcy appointed receiver, a custodian, or an o es		ty in the possessio	n of an assignee	for the benefit	of creditors, a

morade any alterneys, bankraptey petition proparers,	or orealt obtained ling agentions for services required in	your barmaptoy.	
□ No■ Yes. Fill in the details.			
Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount o paymer
Bankruptcy Law Group, PC 1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923	Attorney Fees: \$0.00, \$1,700 balance will be paid post-filing Court Fee: \$335 Costs: \$100 (Credit Report & Education Courses)		\$435.0

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment or Amount of Address transferred transfer was payment made

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include

- 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.
 - No

☐ Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 5

Business Name Employer Identification number Describe the nature of the business Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code)

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

Official Form 107

Part 12: Sign Below

DocuSign Envelope ID: AE2AF77B-BE11-4365-9DB4-514ED8BCDD76

Hileed 0054 0084 1166

Debtor 1 Mayfield, Stanley

Case number (if known)

bankgunstov case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18.U.S.C. §§ 152, 1341, 1519, and 3571.

Signature of Debtor 2

Signature of Debtor 1

4/4/2016

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No

Yes

No

Yes. Name of Person

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this info	ormation to identify your case:		Ch	eck one	hox only as d	irected in this form an	d in Form
Debtor 1	Stanley Mayfield			2A-1Sup			y 111 1 O1111
Debtor 2				■ 1 Th	ere is no presi	umption of abuse	
(Spouse, if filing)				_	·	•	
United States	Eastern District of Sacramento Divisi	,	_	a	oplies will be m	o determine if a presu nade under <i>Chapter 7 l</i> cial Form 122A-2).	•
Case numbe (if known)	r					does not apply now be out it could apply later.	cause of qualified
				☐ Che	ck if this is a	n amended filing	
Official I	Form 122A - 1						
Chapte	r 7 Statement of Your Cur	rent Mor	ithly Inc	ome	!		12/15
a separate she number (if kno nilitary service	e and accurate as possible. If two married people a et to this form. Include the line number to which th wn). If you believe that you are exempted from a pr e, complete and file Statement of Exemption from R Calculate Your Current Monthly Income	e additional infor esumption of ab	mation applies. use because you	On the tu do not	op of any additi have primarily	ional pages, write your consumer debts or bec	name and case ause of qualifying
1. What is	your marital and filing status? Check one onl	у.					
■ Not	married. Fill out Column A, lines 2-11.						
☐ Marı	r <mark>ied and your spouse is filing with you.</mark> Fill ou	t both Columns	A and B, lines 2	2-11.			
☐ Marı	ried and your spouse is NOT filing with you. \	ou and your s	pouse are:				
□ Li	ving in the same household and are not legal	ly separated. F	ill out both Colu	umns A	and B, lines 2-	11.	
р	ving separately or are legally separated. Fill of enalty of perjury that you and your spouse are leg part for reasons that do not include evading the M	ally separated ur	nder nonbankru	ptcy law	that applies or		
101(10A). F 6 months, a	verage monthly income that you received from all so example, if you are filing on September 15, the 6-med the income for all 6 months and divide the total by the rental property, put the income from that property in	onth period would 6. Fill in the result.	be March 1 throu Do not include a	igh Augu ny incom	st 31. If the amore t	unt of your monthly incor han once. For example, i	ne varied during the
				Colum		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, a deductions).	nd commission	ns (before all	\$	5,477.16	\$	
	y and maintenance payments. Do not include payments.	payments from a	a spouse if	\$	0.00	\$	•
of you of from an roomma	ounts from any source which are regularly paint your dependents, including child support. unmarried partner, members of your household, yates. Include regular contributions from a spouse nclude payments you listed on line 3	Include regular	contributions	 n. \$	0.00	\$	
5. Net ince	ome from operating a business, profession, o						
			otor 1				
	eceipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
	y and necessary operating expenses	· —	Copy here ->	Φ.	0.00	\$	
	othly income from a business, profession, or farr	n \$	Copy Here ->	φ	0.00	Ψ	
6. Net inco	ome from rental and other real property	Det	otor 1				
Gross re	eceipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00					
	nthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	_
7. Interest	t, dividends, and royalties	<u>-</u>		\$	0.00	\$	_

Mayfield, Stanley Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit 0.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 5,477.16 \$ 5,477.16 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 5,477.16 **x** 12 Multiply by 12 (the number of months in a year) 65.725.92 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: CA Fill in the state in which you live. Fill in the number of people in your household. 66.537.00 Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy cleix office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box There is no presumption of abuse. 14a Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. **Stanley Mayfield** Signature of Debtor 1 Date MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

Official Form 122A-1

Fill in this inforn	nation to identify your c	ase:		1
Debtor 1	Stanley Mayfield			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
	nkruptcy Court for the:	EASTERN DISTE	RICT OF CALIFORNIA, SACRAMENTO	
Cooperumber				
Case number(if known)				☐ Check if this is an amended filing
Official Fo Statemer		n for Indi	viduals Filing Under Chap	ter 7 12/15
■ creditors have ■ you have leas You must file this whiche the forr If two married pe and dat Be as complete a write you	ver is earlier, unless the n ople are filing together i te the form. and accurate as possible our name and case num	r property, or d the lease has no hin 30 days after court extends the n a joint case, bot . If more space is per (if known).		e creditors and lessors you list on formation. Both debtors must sign
1. For any credito			: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
information be Identify the cre	elow. editor and the property th	at is collateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
	enlar Loan Admin & Cenlar)	Reporting	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of		acramento,	☐ Retain the property and enter into a Reaffirmatic Agreement.	■ Yes
property CA 95833-4421 securing debt:			■ Retain the property and [explain]: Retain and pay pursuant to contract	
	avy Federal Credit U	nion	☐ Surrender the property.	■ No
name:			Retain the property and redeem it.	na 🗆 Yes
Description of			Retain the property and enter into a Reaffirmatic Agreement.	on Lites
property securing debt:	Sedan (2.5L 4cyl C	V I)	☐ Retain the property and [explain]:	_
Part 2: List Yo	our Unexpired Personal	Property Leases		
For any unexpire the information b	ed personal property least pelow. Do not list real es	se that you listed tate leases. Unexp	in Schedule G: Executory Contracts and Unexpire pired leases are leases that are still in effect; the le rustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your u	nexpired personal prope	erty leases		Will the lease be assumed?

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

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page 1

Case number (if known)
□ No
☐ Yes
operty of my estate that secures a debt and any personal
ure of Debtor 2

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California, Sacramento Division

In re	Mayfield, Stanley		Case N	lo.	
		Debtor(s)	Chapte	r 7	
	DISCLOSURE OF COMP	ENSATION OF ATT	ORNEY FOR	R DEBTOR	
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the filiple rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankrupto	y, or agreed to be	paid to me, for serv	
	For legal services, I have agreed to accept		\$	1,700.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	1,700.00	
2. 7	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. 7	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
1 .	I have not agreed to share the above-disclosed comfirm.	pensation with any other perso	on unless they are 1	members and assoc	iates of my law
I	☐ I have agreed to share the above-disclosed compensorpy of the agreement, together with a list of the na				of my law firm. A
5.]	In return for the above-disclosed fee, I have agreed to r	ender legal service for all aspe	ects of the bankrup	tcy case, including	:
t c	Analysis of the debtor's financial situation, and rend Depreparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credit Definition of the debtor at the meeting of credit Definition of the debtor at the meeting of credit	tement of affairs and plan which	ch may be required	d;	n bankruptcy;
б. I	By agreement with the debtor(s), the above-disclosed for Motions such as motion to redeem and			affirmation hear	ing
		CERTIFICATION			
I this ba	certify that the foregoing is a complete statement of an ankruptcy proceeding.			for representation of	of the debtor(s) in
4	4/4/2016	Paul Bains			
\overline{D}	ate	Pauldeep Bains			
		Signature of Attorn Bankruptcy Law			
		1851 Heritage Lı	n Ste 298		
		Sacramento, CA (916) 678-5000		7260	
		paulb@bankrup		200	
		Name of law firm			

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	Part 1: Identify Yourself								
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):					
1.	Your full name								
	Write the name that is on	Janis							
	your government-issued picture identification (for example, your driver's	First name		First name					
		Ann							
	license or passport).	Middle name		Middle name					
	Bring your picture	_ Broumley							
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)					
2.	All other names you have used in the last 8 years Include your married or maiden names.	Janis A Broumley Janis Broumley							
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6324							

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Debtor 1 Broumley, Janis Ann

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live		If Debtor 2 lives at a different address:		
		2213 Santa Fe Ct Fairfield, CA 94533-2241 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Solano County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Debtor 1 Broumley, Janis Ann

Case number (if known)

7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Ch	apter 7						
		☐ Ch	apter 11						
		☐ Ch	apter 12						
		☐ Ch	apter 13						
8.	How you will pay the fee		about how yo If your attorne	vill pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details nout how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a e-printed address.					
					sign and attach the Application for Individuals to Pay Th				
Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7 not required to, waive your fee, and may do so only if your income is less than 150% of the official									
			your family si	ze and you are una		. If you choose this option, you must fill out the Application			
€.	Have you filed for bankruptcy within the last 8 years?	■ No.							
	•		District		When	Case number			
			District		When	Case number			
			District		When	Case number			
10.	Are any bankruptcy cases pending or being filed by	■ No							
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes	s.						
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	□ No.	Go to I	ine 12.					
	residence:	■ Yes	s. Has yo	ur landlord obtaine	ed an eviction judgment against yo	ou and do you want to stay in your residence?			
				No. Go to line 12	<u>.</u>				
				Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this bankruptcy petition.					

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Deb	otor 1 Broumley, Janis A	Ann		Case number (if known)			
Par	t 3: Report About Any Bus	sinesses `	You Own as a Sole Propri	etor			
12.	Are you a sole proprietor						
	of any full- or part-time business?	■ No.	Go to Part 4.				
		☐ Yes.	Name and location of b	usiness			
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if an	у			
	If you have more than one sole proprietorship, use a separate sheet and attach it		Number, Street, City, S	tate & ZIP Code			
	to this petition.		Check the appropriate	box to describe your business:			
			☐ Health Care Bu	siness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Re	eal Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Bro	ker (as defined in 11 U.S.C. § 101(6))			
			☐ None of the abo	ve			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriations. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement crations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedur. C. 1116(1)(B).				
	For a definition of small	■ No.	I am not filing under Ch	I am not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in th Code.				
		☐ Yes.	I am filing under Chapt	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardous Property or A	ny Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of						
	imminent and identifiable hazard to public health or	— 100.	What is the hazard?				
	safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	Number, Street, City, State & Zip Code			

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Broumley, Janis Ann

Case number (if known)

15. Tell the court whether

Debtor 1

you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit

counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

П Incapacity.

> I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Broumley, Janis A	Ann Case number (if known)					
Pari	6: Answer These Questi	ons for Repo	rting Purposes				
16.	What kind of debts do you have?			consumer debts? Consumer debts are descended from the consumer debts are descended, family, or household purpose."	efined in 11 U.S.C.§ 101(8) as "incurred by an		
			No. Go to line 16b.				
			Yes. Go to line 17.				
				business debts? Business debts are debat or through the operation of the business of			
			No. Go to line 16c.				
			Yes. Go to line 17.				
		16c. St	ate the type of debts you	owe that are not consumer debts or busine	ss debts		
17.	Are you filing under Chapter 7?	□ No. I a	am not filing under Chapt	er 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and			Do you estimate that after any exempt propable to distribute to unsecured creditors?	perty is excluded and administrative expenses are		
	administrative expenses are paid that funds will be		l _{No}				
	available for distribution to unsecured creditors?		l Yes				
18.	How many Creditors do ■ 1-49			1 ,000-5,000	2 5,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000		
		□ 100-199 □ 200-999		□ 10,001-25,000	☐ More than100,000		
19.	How much do you estimate your assets to	\$0 - \$50 ,	000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	be worth?	\$50,001		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
		□ \$100,001 □ \$500,001		□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
20	How much do you			□ \$1,000,001 - \$10 million	П Ф500 000 004 . Ф4 billion		
_0.	estimate your liabilities to	■ \$0 - \$50, □ \$50,001		□ \$10,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion		
	be?	□ \$100,001		☐ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion		
		\$500,001	- \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
Part	7: Sign Below						
For	you	I have exami	ned this petition, and I de	clare under penalty of perjury that the inform	mation provided is true and correct.		
				r 7, I am aware that I may proceed, if eligit vailable under each chapter, and I choose to	ole, under Chapter 7, 11,12, or 13 of title 11, Unite o proceed under Chapter 7.		
		have obtaine	d and read the notice req	uired by 11 U.S.C. § 342(b).	at an attorney to help me fill out this document, I		
		·		e chapter of title 11, United States Code, s			
		underständ case/dan/se	making a false statement with times up to \$250,00	t, concealing property, or obtaining money of 0, or imprisonment for up to 20 years, or both controls.	or property by fraud in connection with a bankruptc oth. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		
		Janis Ann Signature of	Broumley Debtor 1	Signature of De	ebtor 2		
		Executed on	3/29/2016	Executed on			

DocuSign Envelope ID: C4D18431-33A6-4297-9EFA-5A1CF377DA Hileed 1023/0331/1166 Debtor 1 Broumley, Janis Ann Case number (if known) For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under represented by one Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. If you are not represented by an attorney, you do not need to file this page. Paul Bains 3/29/2016 Date Signature of Attorney for Debtor MM / DD / YYYY **Pauldeep Bains** Bankruptcy Law Group, PC 1851 Heritage Ln Ste 298

Email address

paulb@bankruptcylg.com

Sacramento, CA 95815-4923
Number, Street, City, State & ZIP Code
Contact phone (707) 422-8500

268004Bar number & State

Certificate Number: 17572-CAE-CC-027160174



CERTIFICATE OF COUNSELING

I CERTIFY that on March 22, 2016, at 1:35 o'clock PM PDT, Janis Broumley received from Dollar Learning Foundation, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 22, 2016 By: /s/Sylvia Araya

Name: Sylvia Araya

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill	in this inform	ation to identify your	case:			
	tor 1	Janis Ann Broun				
Den	ioi i	First Name	Middle Name	Last Name		
	tor 2 use if, filing)	First Name	Middle Name	Last Name		
Орос	ase ii, iiiiig)	i iist ivaille		F CALIFORNIA, SACRAMENTO		
Unit	ed States Ban	kruptcy Court for the:	DIVISION	CALIFORNIA, SACRAWENTO		
Cas	e number					
(if kno	own)				_	ck if this is an
					amei	nded filing
~ · ·		4000				
		<u>m 106Sum</u>	and Liabilities an	d Contain Statistical Information		
				d Certain Statistical Information refiling together, both are equally responsible		12/15
infor	mation. Fill o	ut all of your schedule	es first; then complete the	information on this form. If you are filing amer the box at the top of this page.		
Part	1: Summa	arize Your Assets				
						assets
					Value	of what you own
1.		B: Property (Official Fo			\$	0.00
						13,766.56
	1c. Copy line	e 63, Total of all property	y on Schedule A/B		\$	13,766.56
Part	2: Summa	arize Your Liabilities				
					Your	liabilities
					Amour	nt you owe
2.			laims Secured by Property (Comman AAmount of claim, at the	Official Form 106D) bottom of the last page of Part 1 of Schedule D	\$	0.00
3.			Unsecured Claims (Official F		œ.	0.00
	.,		,	s) from line 6e 3 chedule E/F	»	0.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured cla	aims) from line 6j d3chedule E/F	\$	26,070.00
				Your total liabili	ties \$	26,070.00
Dort	2: Summa	arize Your Income and	Evnonoo			
Part	'					
4.		Your Income(Official Foombined monthly incom			\$	1,382.00
5.	Schedule J:	Your Expenses (Official	Form 106J)			
٠.	Copy your mo	onthly expenses from lin	e 22c of Schedule J		\$	1,481.68
Part	4: Answer	These Questions for	Administrative and Statist	tical Records		
6.	Are you filin	g for bankruptcy unde	er Chapters 7, 11, or 13?			
	☐ No. You	have nothing to report of	on this part of the form. Chec	ck this box and submit this form to the court with yo	ur other sched	ules.
	Yes					
7.	What kind o	f debt do you have?				
	■ Your de	ebts are primarily cons e." 11 U.S.C. § 101(8). F	sumer debts. Consumer de Fill out lines 8-9g for statistic	ebts are those "incurred by an individual primarily fo cal purposes. 28 U.S.C§ 159.	r a personal, fa	mily, or household
	☐ Your de	ebts are not primarily	consumer debts. You have	nothing to report on this part of the form. Check th	is box and sub	mit this form to the
Offic		th your other schedules.		ties and Certain Statistical Information		page 1 of 2
		J				

Debtor 1 Broumley, Janis Ann

Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		Cettaile 1100-22/21016-11		ML ID		
Fill in this inform	mation to identify your ca	se and this filing:				
Debtor 1	Janis Ann Brouml	ey				
_	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF CA	ALIFORNIA, SACRAMENTO	DIVISION		
0	_					
Case number _						Check if this is an amended filing
						· ·
Official Fo	rm 106A/B					
	e A/B: Prope	artv				40/45
			. If an asset fits in more than o	one category, list the assu	et in the c	12/15
think it fits best. B	se as complete and accurate re space is needed, attach a	as possible. If two married pe	ople are filing together, both a n the top of any additional pag	re equally responsible fo	r supplyir	ng correct
Part 1: Describe	Each Residence, Building, I	and, or Other Real Estate Yo	u Own or Have an Interest In			
1. Do vou own or l	have any legal or equitable i	nterest in any residence, build	ling, land, or similar property?			
_		ntoroot in any roomonoo, bane	ing, iana, or cilinal property.			
No. Go to Par	·· - ·					
☐ Yes. Where i	is the property?					
Part 2: Describe	Your Vehicles					
Do you own, leas	se, or have legal or equita	able interest in any vehicle	s, whether they are register	red or not? Include any	vehicles	you own that
someone else driv	res. If you lease a vehicle, a	Iso report it on Schedule G:	Executory Contracts and Une	expired Leases.		
3. Cars, vans, tr	ucks, tractors, sport utilit	y vehicles, motorcycles				
□ No						
Yes						
				Do not do duot occur		
-	Kia Soul		in the property? Check one	Do not deduct secur the amount of any s	ecured cla	ims on <i>Schedule D:</i>
	2015			Creditors Who Have		
Approxima			or 2 only	Current value of th entire property?		urrent value of the ortion you own?
Other infor	mation:	At least one of the	debtors and another			
		Check if this is co	ommunity property	\$11,276.	<u>oo</u> .	\$11,276.00
4. Watercraft, ai	rcraft, motor homes, ATV	s and other recreational v	ehicles, other vehicles, and	accessories		
Examples: Boa	ts, trailers, motors, persona	l watercraft, fishing vessels,	snowmobiles, motorcycle acco	essories		
■ No						
☐ Yes						
C A d d 4h a d a ll a		fan all af antois	a franc Bart O in alcelina and			
			s from Part 2, including any			\$11,276.00
				L		
	Your Personal and Househ	old Items le interest in any of the fol	lowing itams?		Cur	ent value of the
Do you own or i	nave any legal of equitab	io milorest in any of the fol	ownig itellis :		porti	ion you own?
						ot deduct secured ns or exemptions.
	oods and furnishings ajor appliances, furniture, lir	iens china kitchenword				,
□ No	ajor appriarios, rurriture, III	ions, onina, NitonellWale				

Schedule A/B: Property

Official Form 106A/B
Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com

page 1

Schedule A/B: Property

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com

■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Schedule A/B: Property Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com

Official Form 106A/B page 3

Sign Envelope ID: C4D1843	1-33A6-4297-9EFA-5A1CE377DAAE Casse 166-2221824	eeth 0053/0331/1166	
Debtor 1 Broumley, J	Janis Ann	Case number (if kno	own)
☐ Yes Ir	stitution name and description. Separately file the	records of any interests.11 U.S.C. § 521(c):
25. Trusts, equitable or fu t ■ No □ Yes. Give specific inf	ture interests in property (other than anything	listed in line 1), and rights or powers	exercisable for your benefit
26. Patents, copyrights, tr	ademarks, trade secrets, and other intellectua ain names, websites, proceeds from royalties and		
■ No□ Yes. Give specific inf	formation about them		
Examples: Building peri	and other general intangibles mits, exclusive licenses, cooperative association h	oldings, liquor licenses, professional licen	ses
■ No□ Yes. Give specific inf	formation about them		
Money or property owed to	to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to y	ou		
■ No	ormation about them, including whether you already	y filed the returns and the tax years	
- res. Give specific file	mater about them, mordaling whether you directed	Thou the retains and the tax years	
unpaid loan		s, sick pay, vacation pay, workers' compe	ensation, Social Security benefits
■ No □ Yes. Give specific info	ormation		
31. Interests in insurance Examples: Health, disal	policies bility, or life insurance; health savings account (HS	A); credit, homeowner's, or renter's insura	ance
Yes. Name the insurar	nce company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	Life Insurance Policy through Physicians Life Insuarance Compa Face Amount = \$10,000.00 Term Policy	nny Christi Nilsen	\$0.
	ty that is due you from someone who has died y of a living trust, expect proceeds from a life insur		eive property because someone ha
	arties, whether or not you have filed a lawsuit employment disputes, insurance claims, or rights		
☐ Yes. Describe each o	claim		
34. Other contingent and u ■ No □ Yes. Describe each of	unliquidated claims of every nature, including	counterclaims of the debtor and rights	s to set off claims
Official Form 106A/B	Schedule A/B: P	roposti /	pac
	Schedille A/R: P		

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uSign	Envelope ID: C4D18431-33A6-4297-9EFA-5A1CF377DAAE	Hileed 003/03/1166	Doc 115	
Deb	otor 1 Broumley, Janis Ann		Case number (if known)	
35.	Any financial assets you did not already list			
	No			
	Yes. Give specific information			
36.	Add the dollar value of all of your entries from Part 4, including Part 4. Write that number here			\$1,490.56
Part	5: Describe Any Business-Related Property You Own or Have an Inter-	est In. List any real estate	e in Part 1.	
37. [Oo you own or have any legal or equitable interest in any business-relate	d property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part		Own or Have an Interest	In.	
	If you own or have an interest in farmland, list it in Part 1.			
46.	Do you own or have any legal or equitable interest in any farm- o	or commercial fishing-	related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
53.	Do you have other property of any kind you did not already list?			
	Examples: Season tickets, country club membership			
	■ No ☑ Yes. Give specific information			
	Tes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
	-			· · ·
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$11,276.00		40.00
	Part 3: Total personal and household items, line 15	\$1,000.00		
58.	Part 4: Total financial assets, line 36	\$1,490.56		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$13,766.56	Copy personal property total	\$13,766.56
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$13,766.56
			ı <u> </u>	

Official Form 106A/B Schedule A/B: Property page 5

Vehicle Appraisal

Page 1 of 1



DATE: 3/28/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

VEHICLE INFORMATION:

YEAR: 2015 CONDITION: Average

MAKE: Kia MILEAGE: 5500

MODEL: Soul ZIP CODE: 94533

STYLE: 4dr Wagon (1.6L 4cyl 6A)

OPTIONS:

RETAIL

TRADE IN

PRIVATE PARTY

Edmunds.com TMV® \$12,207.00

\$10,072.00

\$11,276.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any options. (If no Zip Code was provided, this price is the national price.)

DATA PROVIDED BY



Fill in this infor	mation to identify your	case:		
Debtor 1	Janis Ann Broun	nley		
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENTO	
Case number				
(if known)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property You	Claim as	Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
Kia Soul	\$11,276.00		\$5,100.00	CCCP § 703.140(b)(2)	
2015 5500 Line from Schedule A/B 3.1			100% of fair market value, up to any applicable statutory limit		
Kia Soul	\$11,276.00		\$1,350.00	CCCP § 703.140(b)(5)	
2015 5500 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
Kia Soul	\$11,276.00		\$4,826.00	CCCP § 703.140(b)(5)	
2015 5500 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
Household Goods Line from Schedule A/B 6.1	\$100.00		\$100.00	CCCP § 703.140(b)(3)	
LINE HOITI SCHEAUIE AVE. 0.1			100% of fair market value, up to any applicable statutory limit		

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	, , , , , , , , , , , , , , , , , , , ,		Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
Electronics	\$300.00		\$300.00	CCCP § 703.140(b)(3)	
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit		
Smith and Wesson 9mm	\$200.00		\$200.00	CCCP § 703.140(b)(3)	
Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit		
Clothes Line from Schedule A/B 11.1	\$300.00		\$300.00	CCCP § 703.140(b)(3)	
			100% of fair market value, up to any applicable statutory limit		
Jewelry Line from Schedule A/B 12.1	\$100.00	•	\$100.00	CCCP § 703.140(b)(4)	
			100% of fair market value, up to any applicable statutory limit		
Cash on Hand Line from Schedule A/B 16.1	\$1,350.00	•	\$1,350.00	CCCP § 703.140(b)(10)(A)	
			100% of fair market value, up to any applicable statutory limit		
Travis Credit Union 8-317 Line from Schedule A/B 17.1	\$18.00		\$0.00	CCCP § 703.140(b)(10)(A)	
			100% of fair market value, up to any applicable statutory limit		
Travis Credit Union 8-317 Line from Schedule A/B 17.1	\$18.00		\$18.00	CCCP § 703.140(b)(5)	
			100% of fair market value, up to any applicable statutory limit		
Travis Credit Union 8-086 Line from Schedule A/B 17.2	\$5.00		\$0.00	CCCP § 703.140(b)(10)(A)	
			100% of fair market value, up to any applicable statutory limit		
Travis Credit Union 8-086 Line from Schedule A/B 17.2	\$5.00		\$5.00	CCCP § 703.140(b)(5)	
			100% of fair market value, up to any applicable statutory limit		
Navy FCU 3-713 Line from Schedule A/B 17.3	\$87.47		\$0.00	CCCP § 703.140(b)(10)(A)	
-			100% of fair market value, up to any applicable statutory limit		
Navy FCU 3-713 Line from Schedule A/B 17.3	\$87.47	•	\$87.47	CCCP § 703.140(b)(5)	
-			100% of fair market value, up to any applicable statutory limit		
Navy FCU 3-101 Line from Schedule A/B 17.4	\$30.09		\$0.00	CCCP § 703.140(b)(10)(A)	
			100% of fair market value, up to any applicable statutory limit		

Official Form 106C

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Navy FCU 3-101 Line from Schedule A/B 17.4	\$30.09		\$30.09	CCCP § 703.140(b)(5)
	LITE HOLL SCHEDULE AVE. 17.4			100% of fair market value, up to any applicable statutory limit	
	Life Insurance Policy through	\$0.00			CCCP § 703.140(b)(8)
	Physicians Life Insuarance Company Face Amount = \$10,000.00 Term Policy Line from Schedule A/B: 31.1		•	100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 yr No			on or after the date of adjustment.)	
	Yes. Did you acquire the property covered	by the exemption within	า 1,21	5 days before you filed this case?	
	□ No □ Yes				

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C288E 1692/2034 Fileth 053031/116 Docc1

Fill in this infor				
Debtor 1	Janis Ann Broun	nley		
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENT	то
Case number				
(if known)				☐ Check if this is amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

			Gattan: 11		1111032103373321			
Fill in t	this informa	ation to identify your c	ase:					
Debtor	1	Janis Ann Broum	lev					
		First Name	Middle Na	ame	Last Name		}	
Debtor	_		A				ļ	
(Spouse i	it, tiling)	First Name	Middle Na	ame	Last Name			
United	States Ban	kruptcy Court for the:	EASTERN DIVISION	DISTRICT OF	CALIFORNIA, SACI	RAMENTO		
Case n				_				
(if known)							heck if this is an
							a	mended filing
Offici	al Form	106E/F						
		F: Creditors W	ho Have	Unsecur	ed Claims			12/15
		accurate as possible. Use				rt 2 for creditors with NO	NPRIORITY clain	
D: Credit the Cont	tors Who Ha tinuation Pao mber (if knov	ive Claims Secured by Proge to this page. If you have	operty. If more e no information	space is neede on to report in a	d, copy the Part you	need, fill it out, number t	he entries in the	
		s have priority unsecured						
_	-	-	i Cialilis agailis	ot your				
	No. Go to Pa	Ift 2.						
	Yes.	of Your NONPRIORITY	/ Unacquired (Claima				
Part 2:								
_	-	s have nonpriority unsec	•	-				
Ш	No. You have	e nothing to report in this pa	art. Submit this fo	orm to the court	with your other schedu	ules.		
	Yes.							
uns	ecured claim	nonpriority unsecured cla , list the creditor separately r holds a particular claim, lis	for each claim.	For each claim I	isted, identify what type	e of claim it is. Do not list of	claims already incl	uded in Part 1. If more
								Total claim
4.1	Bank of	America		Last 4 digits o	f account number			\$5,000.00
	Nonpriority	Creditor's Name			-			· •
	РО Вох	15010		wnen was the	debt incurred?			-
		ton, DE 19886-5019						
		eet City State Zlp Code		As of the date	you file, the claim is:	: Check all that apply		
	Who incurr	red the debt? Check one.						
	Debtor 1	1 only		☐ Contingent				
	Debtor 2	2 only		☐ Unliquidated	d			
	Debtor 1	1 and Debtor 2 only		☐ Disputed				
	☐ At least	one of the debtors and and	ther		RIORITY unsecured of	claim:		
		f this claim is for a comn	nunity	Student loar				
	debt	n subject to offset?				ation agreement or divorce	that you did not	
		i subject to onset?		report as priority	•	plans, and other similar de	hts	
	■ No			_		pians, and other similar de	ะมเอ	
	☐ Yes			Other. Spec	cify			-

Debto	Broumley, Janis Ann	Case number (f know)	
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	\$16,000.00
		When was the debt incurred?	
	PO Box 30253		
	Salt Lake City, UT 84130-0253 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	no or and date you me, and diamner once an anat apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.3	HSBC Card Services	Last 4 digits of account number	\$500.00
	Nonpriority Creditor's Name		
	PO Box 60102	When was the debt incurred?	
	City of Industry, CA 91716-0102		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.4	Merrick Bank	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 660702		
	Dallas, TX 75266-0702	_	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes		
	ப 165	Other. Specify	

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Debto	Broumley, Janis Ann	Case number (if know)	
4.5	Sam's Club Nonpriority Creditor's Name	Last 4 digits of account number	\$200.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 530942		
	Atlanta, GA 30353-0942		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes		
	Li res	Other. Specify	
4.6	SYNCB/Walmart	Last 4 digits of account number	\$200.00
	Nonpriority Creditor's Name	 -	,
	DO Dov 520027	When was the debt incurred?	
	PO Box 530927 Atlanta, GA 30353-0927		
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.7	Usaa Savings Bank Nonpriority Creditor's Name	Last 4 digits of account number 3680	\$3,170.00
	,	When was the debt incurred?	
	PO Box 47504		
	San Antonio, TX 78265-7504 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
		·	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify	
	_ · · · · ·	Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Broumley, Janis Ann

Case number (f know)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims	CI-	Towns and and in all and all the control to the control to	CI-	•	
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	04	Obstantia	04		Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	26,070.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	26,070.00

Fill in this infor				
Debtor 1	Janis Ann Broun	nley		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENTO	0
Case number				
(if known)				☐ Check if this is amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1			i		
	Name				_
	Number	Street			<u> </u>
	Number	Olicci			
	City		State	ZIP Code	
2.2	News				_
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					<u> </u>
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	-				
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	_

Fill in this info	ormation to identify your	casa:		
Debtor 1	Janis Ann Broun	Niddle Name	Last Name	
Debtor 2	riotitaino	Wildale Harrie	Last Hamo	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF O	CALIFORNIA, SACRA	AMENTO
Case number (if known)				☐ Check if this is an amended filing
Official F	orm 106H			
		- b 4 - 4 -		
Scheaui	e H: Your Cod	eptors		12/15
and number th case number (e entries in the boxes on if known). Answer every o	the left. Attach the Addition	al Page to this page	ore space is needed, copy the Additional Page, fill it out, On the top of any Additional Pages, write your name an s a codebtor.
■ No				
☐ Yes				
		lived in a community prope New Mexico, Puerto Rico, Te		1? (Community property states and territories include Arizonal divisions in.)
□ No. Go	to line 3			
_		se, or legal equivalent live with	you at the time?	
— 163. Di	a your spouse, ronner spou	se, or legal equivalent live with	you at the time:	
■ 1	No			
	res.			
	In which community state	or torritory did you live?	NONE	Cill in the name and assurant address of that name
	In which community state	or territory did you live?	-NONE-	. Fill in the name and current address of that person.
	Name of your spouse, former sp	ouse, or legal equivalent		
	Number, Street, City, State & Zi			
line 2 aga	in as a codebtor only if th	at person is a guarantor or	cosigner. Make sure	f your spouse is filing with you. List the person shown ir e you have listed the creditor on Schedule D (Official For se Schedule D, Schedule E/F, or Schedule G to fill out
Column 2	•			
	umn 1: Your codebtor e, Number, Street, City, State and Z	IP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1				☐ Schedule D, line
Nam	е			☐ Schedule E/F, line
				☐ Schedule G, line
Num	ber Street			_
City		State	ZIP Code	
3.2 Nam	•			Schedule D, line
Nam	U			☐ Schedule E/F, line
				☐ Schedule G, line
Num	ber Street	Stato	ZIP Code	_
City		State	ZIP Code	

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4	iteeb	OFF	(1231/	11186	Dimc1	11
ш	ши	CATIO	T 1 2 JK			ш

E HIII	in this information to identify your ca	200							
	btor 1 Janis Ann B								
_	btor 2 puse, if filing)				_				
Uni	ited States Bankruptcy Court for the:	EASTERN DISTRICT SACRAMENTO DIVIS	•		_				
(lf kı	se number		-				ded filing nent sho	l wing postpetition o	chapter 13
	fficial Form 106I					MM / DD/	YYYY	=	
S	chedule I: Your Inco	ome							12/15
sup spo atta	as complete and accurate as possiplying correct information. If you ause. If you are separated and your ch a separate sheet to this form. On the complex of	are married and not filin spouse is not filing wit	g jointly, and your h you, do not inclu	spouse is ide informa	living ation a	with you, included the second with your spoot of the second with the second with the second with the second with your spoot of	ude info use. If n	rmation about your nore space is ne	our eded,
1.	Fill in your employment information.		Debtor 1			Debto	2 or no	n-filing spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ■ Not employed	• •			☐ Employed ☐ Not employed		
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name							
	Occupation may include student o homemaker, if it applies.	Femployer's address							
		How long employed th	nere?						
Pa	rt 2: Give Details About Mon	thly Income							
	mate monthly income as of the da	te you file this form. If y	ou have nothing to r	eport for any	y line, v	write \$0 in the s	pace. Ind	clude your non-filir	ng spouse
	ou or your non-filing spouse have more ce, attach a separate sheet to this forn		oine the information	for all emplo	oyers fo	or that person o	n the line	es below. If you ne	ed more
					F	or Debtor 1		Debtor 2 or n-filing spouse	
2.	List monthly gross wages, salar deductions). If not paid monthly, ca			2.	\$_	0.00	_ \$_	N/A	
3.	Estimate and list monthly overti	me pay.		3.	+\$_	0.00	+\$	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$_	0.00	\$	N/A	

Official Form 106I Schedule I: Your Income page

Deb	tor 1	Broumley, Janis Ann	_	Case	number (if known)			
				For	Debtor 1	For Debto		
	Cop	py line 4 here	4.	\$	0.00	\$	N/A	
5.	List	t all payroll deductions:						
٠.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	<u> </u>	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	<u> </u>	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$_	0.00	\$	N/A	
	5e.	Insurance	5e.	\$_	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	0.00	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	0.00	\$	N/A	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	00	<u>—</u>		Φ.		
	0.	monthly net income.	8a.	\$_	0.00	\$ \$	N/A	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8b. 8c.	\$_ \$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	<u> </u>	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	1,382.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$_	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$_	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$_	0.00	+ \$	N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,382.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		1,382.00 + \$_	N/A	A = \$ 1,382.0	00
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your deer friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not average if:	ependen		,		ı. +\$ 0. (00
12.		d the amount in the last column of line 10 to the amount in line 11. The resulte that amount on the Summary of Schedules and Statistical Summary of Certain)0
13.	Do	you expect an increase or decrease within the year after you file this form'	?				Combined monthly income)
	П	Yes, Explain:						_

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	ition to identify yo	our case:					
	otor 1	Janis Ann B				Chec	ck if this is:	
		ounio Ann B	rounney				An amended filing	
	otor 2							ing postpetition chapter 13
(Spo	ouse, if filing)						expenses as of the	following date:
Unit	ed States Bankı	ruptcy Court for the:		RN DISTRICT OF CALIFO MENTO DIVISION	RNIA,	-	MM / DD / YYYY	
	e number nown)							
		rm 106J						
S	chedule	J: Your I	Expen	ses				12/15
info (if k	ormation. If m known). Answ	ore space is need wer every question	eded, attac on.	If two married people are th another sheet to this fo	filing together, botl rm. On the top of a	h are equal ny addition	ly responsible for s aal pages, write you	supplying correct ur name and case number
Par 1.	t 1: Descr Is this a joir	ribe Your House	hold					
١.	No. Go to							
		o line 2. s Debtor 2 live i	n a separa	te household?				
				15 400105				
	ЦΥ	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses f	or Separate Housen	oldof Debto	r 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.					_	☐ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
3.	Do vour ext	oenses include	_	NI.			_	□ res
0.	expenses of	f people other the dynamics of	nan 🗖	No Yes				
exp	imate your ex		our bankru	y Expenses ptcy filing date unless yo is filed. If this is a supple				
val		sistance and ha		overnment assistance if y d it on Schedule I: Your II			Your exp	enses
4.	The rental o	·		ses for your residence. Inc lot.	clude first mortgage	4. \$	3	730.00
		led in line 4:	J					
		estate taxes				4a. \$	8	0.00
		rty, homeowner's,	or renter's	insurance		4b. S	·	0.00
	•	maintenance, re				4c. \$		0.00
		owner's associati				4d. §	<u> </u>	0.00
5.	Additional r	nortgage payme	nts for yo	ur residence, such as hom	e equity loans	5. \$		0.00

Official Form 106J Schedule J: Your Expenses page 1

ebtor 1 Bro	oumley, Janis Ann Cas	se num	ber (if known)	
. Utilities:				
6a. Elec	stricity, heat, natural gas	6a.	\$	0.00
6b. Wat	er, sewer, garbage collection	6b.	\$	0.00
6c. Tele	phone, cell phone, Internet, satellite, and cable services	6c.	\$	72.47
6d. Othe	er. Specify:	6d.	\$	0.00
Food and	housekeeping supplies	7.	\$	0.00
Childcare	and children's education costs	8.	\$	0.00
Clothing,	laundry, and dry cleaning	9.	\$	80.00
0. Personal o	care products and services	10.	\$	65.00
1. Medical a	nd dental expenses	11.	\$	15.00
2. Transport	ation. Include gas, maintenance, bus or train fare.			
	ude car payments.	12.	·	105.00
	nent, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00
1. Charitable	e contributions and religious donations	14.	\$	0.00
5. Insurance				
	lude insurance deducted from your pay or included in lines 4 or 20.	15a.	c	45.00
15a. Life	Ith insurance	15a. 15b.	·	45.62
			·	22.00
	icle insurance	15c.	·	127.59
	er insurance. Specify:	15d.	———	0.00
	not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
Specify:	at ar lagge normanter	10.	Φ	0.00
	nt or lease payments: payments for Vehicle 1	17a.	\$	0.00
	payments for Vehicle 2	17b.	\$	0.00
	er. Specify:	17c.	·	0.00
	er. Specify:	17d.	·	0.00
		. 17u.	Φ	0.00
	nents of alimony, maintenance, and support that you did not report as from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	ments you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	property expenses not included in lines 4 or 5 of this form or on Schedule		r Income.	
20a. Mor	tgages on other property	20a.	\$	0.00
20b. Rea	l estate taxes	20b.	\$	0.00
20c. Prop	perty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Mair	ntenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Hom	neowner's association or condominium dues	20e.	\$	0.00
1. Other: Spe	ecify: Auto Registration	21.	+\$	19.00
•				10.00
	your monthly expenses			
	ines 4 through 21.		\$	1,481.68
	line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add li	ne 22a and 22b. The result is your monthly expenses.		\$	1,481.68
3. Calculate	your monthly net income.			
	y line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,382.00
	y your monthly expenses from line 22c above.	23b.	·	1,481.68
200. Oop	1 Jour Morning experience from the 220 above.	200.		1,401.00
23c. Sub	tract your monthly expenses from your monthly income.			
	result is your monthly net income.	23c.	\$	-99.68
For example modification	pect an increase or decrease in your expenses within the year after you file, do you expect to finish paying for your car loan within the year or do you expect your mor to the terms of your mortgage?			or decrease because of a
☐ No.	Explain here: Debtor's \$730.00 expense for "rent" covers rent			

groceries.

Fill in this inform	nation to identify your	2222		
Debtor 1	nation to identify your			
Debior	Janis Ann Broun First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENTO	
Case number				
(if known)				☐ Check if this is an amended filing
If two married per You must file this obtaining money	ople are filing together	, both are equally respon le bankruptcy schedules n connection with a bankr		
Sign	n Below			
Did you pay	y or agree to pay some	one who is NOT an attorr	ney to help you fill out bankruptcy	forms?
☐ Yes. N	lame of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penal	ty of perjury, I declare ୁଖିଣ ଅଧିନ୍ୟ correct.	that I have read the sumr	nary and schedules filed with this	declaration and
	s Brownley		X	
Jan 3	Ann ⁷ Broumley re of Debtor 1		Signature of Debtor 2	
Date _	/29/2016		Date	

Bank of America PO Box 15019 Wilmington, DE 19886-5019

Capital One PO Box 30253 Salt Lake City, UT 84130-0253

HSBC Card Services PO Box 60102 City of Industry, CA 91716-0102

Merrick Bank PO Box 660702 Dallas, TX 75266-0702

Sam's Club PO Box 530942 Atlanta, GA 30353-0942

SYNCB/Walmart PO Box 530927 Atlanta, GA 30353-0927

Usaa Savings Bank PO Box 47504 San Antonio, TX 78265-7504

Fill in	n this inform	nation to identify you	r case:					
Debt	or 1	Janis Ann Brou	Middle Name		Last Name			
Debte	or 2	First Name	Middle Name		Last Name	1		
	se if, filing)	First Name	Middle Name		Last Name			
Unite	ed States Bar	nkruptcy Court for the:	EASTERN DISTRICT DIVISION	OF CALIFO	DRNIA, SACRAMEN	то		
Case (if know	number _						□ Cł	neck if this is an
								nended filing
Sta Be as inform	complete a	of Financial	Affairs for Individue If two married people attach a separate sheet t	are filing	together, both are e	equally responsible		
Part			arital Status and Where Y	ou Lived E	Sefore			
1. V	What is your	current marital statu	s?					
[☐ Married							
Ī	Not mar	ried						
2. [[■ No		lived anywhere other that					
	Debtor 1 Pri	ior Address:	Dates Debto	r 1 lived	Debtor 2 Prior Ad	ddress:		Dates Debtor 2 lived there
			ver live with a spouse or lifornia, Idaho, Louisiana, I					
[☐ Yes. Ma	ke sure you fill out <i>Sch</i>	edule H: Your Codebtors (Official Forr	n 106H).			
Part	2 Explai	n the Sources of You	r Income					
F	Fill in the tota	I amount of income yo	nployment or from opera u received from all jobs ar nave income that you receiv	nd all busine	esses, including part	-time activities.	ous calenda	ır years?
	No							
L		in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of inco		Gross income (before deductions and exclusions)

Official Form 107

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount you paid

Still owe

Was this payment for ...

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

■ No

Yes. List all payments to an insider

Insider's Name and Address

Dates of payment

Total amount

paid

Amount you

still owe

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

	insider?	anad by an incider							
	Include payments on debts guaranteed or cosig	gried by an insider.							
	No No								
	Yes. List all payments to an insider				_				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name			
Par	t 4: Identify Legal Actions, Repossession	s and Foreclosures	•						
	Within 1 year before you filed for bankrupto List all such matters, including personal injury of and contract disputes.								
	■ No								
	☐ Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency		Status of th	e case			
	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No Yes. Fill in the information below.		rty repossessed, fo	reclosed, garnisho	ed, attached, s	seized, or levied?			
	Creditor Name and Address	Describe the Property		Date		Value of the			
		Explain what happened	1			property			
						_			
i	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca No Yes. Fill in the details.		uding a bank or fina	incial institution, s	et off any am	ounts from your			
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount			
				taken					
	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?								
	■ No □ Yes								
Par	t 5: List Certain Gifts and Contributions								
				.f					
13.	Within 2 years before you filed for bankrup ■ No	icy, did you give any gins	s with a total value o	n more man \$600	per person?				
	Yes. Fill in the details for each gift.								
	Gifts with a total value of more than \$600 person	Describe the gifts		Dates the gi	you gave fts	Value			
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankrup	tcy, did you give any gifts	or contributions w	ith a total value of	more than \$6	600 to any charity			
	No No								
	Yes. Fill in the details for each gift or contract								
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al Describe what you	ı contributed	Dates contri	you buted	Value			
Par	t 6: List Certain Losses								

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Broumley, Janis Ann					Case number(if known)			
	or gambling?							
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and	Doscri	be any insurance coverage for the lo	cc	Date of your	Value of property		
	how the loss occurred							
Par	rt 7: List Certain Payments or Trans	fers						
16.	Within 1 year before you filed for bar consulted about seeking bankruptcy Include any attorneys, bankruptcy petitio	or preparin				y to anyone you		
	□ No							
	Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any prope transferred	Date payment of transfer was made		Amount of payment		
	Bankruptcy Law Group, PC 1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923 Christi Nilsen	0.100	Attorney: \$1,500 Court Fee: \$335 Costs (credit report & education courses): \$100	on		\$1,935.00		
17.		creditors or	to make payments to your creditors'		transfer any propert	y to anyone who		
	Person Who Was Paid		Description and value of any prope	ertv	Date payment or	Amount of		
	Address		transferred	,	transfer was made	payment		
18.	Within 2 years before you filed for batransferred in the ordinary course of Include both outright transfers and trans gifts and transfers that you have already No Yes. Fill in the details.	your busing fers made as	ess or financial affairs? s security (such as the granting of a secu					
	Person Who Received Transfer		Description and value of property transferred		any property or	Date transfer was		
	Person's relationship to you	Address Person's relationship to you		payments paid in exc	s received or debts made xchange			
19.	Within 10 years before you filed for beneficiary? (These are often called as No Yes. Fill in the details.			lf-settled trus	et or similar device of	which you are a		
	Name of trust		Description and value of the prope	rty transferre	d	Date Transfer was made		

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

■ No

☐ Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit
Address (Number, Street, City, State and

Environmental law, if you know it

ental law, if you Date of notice

Official Form 107

■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6 Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com **EXHIBIT 2**

Fill in this info	ormation to identify your case:				nly as d	irected in this form and	in Form
Debtor 1	Janis Ann Broumley		122	A-1Supp:			
Debtor 2			•	■ 1. There is	no pres	umption of abuse	
(Spouse, if filing)				_	•	·	mation of abuse
United States	Eastern District of Sacramento Division	,		applies	will be n	o determine if a presur nade under <i>Chapter 7 N</i> cial Form 122A-2).	•
Case number	•					does not apply now bedout it could apply later.	ause of qualified
			[☐ Check if	this is a	an amended filing	
	Form 122A - 1	4 8 8 4 4 1 1					
Chaptei	r 7 Statement of Your Cui	rent Monthl	y Inco	ome			12/1
a separate sheen number (if known military service	e and accurate as possible. If two married people a bet to this form. Include the line number to which the wn). If you believe that you are exempted from a p e, complete and file Statement of Exemption from calculate Your Current Monthly Income	ne additional information resumption of abuse be	n applies. C ecause you	On the top of a do not have p	ny addit rimarily	ional pages, write your i consumer debts or beca	name and case ause of qualifying
1. What is	your marital and filing status? Check one on	ıly.					
■ Not r	married. Fill out Column A, lines 2-11.						
☐ Marr	ied and your spouse is filing with you. Fill ou	ut both Columns A and	B, lines 2	-11.			
☐ Marr	ied and your spouse is NOT filing with you.	You and your spouse	e are:				
□Liv	ving in the same household and are not lega	Ily separated. Fill out	both Colui	mns A and B	lines 2-	11.	
pe	ving separately or are legally separated. Fill of enalty of perjury that you and your spouse are legorart for reasons that do not include evading the N	gally separated under n	onbankrup	tcy law that a	oplies or		
101(10A). Fo 6 months, ad	verage monthly income that you received from all or example, if you are filing on September 15, the 6-m dd the income for all 6 months and divide the total by the rental property, put the income from that property in	nonth period would be Ma 6. Fill in the result. Do no	arch 1 throught include any	gh August 31. I y income amou	f the amo int more t	unt of your monthly incom	ne varied during the
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	oss wages, salary, tips, bonuses, overtime, a eductions).	and commissions (be	fore all	\$	0.00	\$	
	y and maintenance payments. Do not include B is filled in.	payments from a spou	use if	\$	0.00	\$	
of you of from an roomma	unts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household, tes. Include regular contributions from a spous nclude payments you listed on line 3	Include regular contril your dependents, pare	butions ents, and	\$	0.00	\$	
5. Net inco	ome from operating a business, profession,						
Gross re	eceipts (before all deductions)	Debtor 1 \$0.00					
Ordinary	and necessary operating expenses	-\$ 0.00					
Net mon	athly income from a business, profession, or far	m \$0.00_ Cop	y here -> S	\$	0.00	\$	
6. Net inco	ome from rental and other real property	Debtor 1					
Gross re	eceipts (before all deductions)	\$ 0.00					
	and necessary operating expenses	-\$ 0.00					
Net mon	othly income from rental or other real property	\$ 0.00 Cop	y here -> 9	\$	0.00	\$	
7. Interest	, dividends, and royalties			\$	0.00	\$	

Debtor 1 Broumley, Janis Ann Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit 0.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 0.00 0.00 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 0.00 Multiply by 12 (the number of months in a year) **x** 12 0.00 12b. The result is your annual income for this part of the form 13. Calculate the median family income that applies to you. Follow these steps: CA Fill in the state in which you live. Fill in the number of people in your household. 50.519.00 Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy cleix office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box There is no presumption of abuse. 14a Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, Declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Janus Brownley Janis Ann Broumley Date MM / DD / YYYY

Official Form 122A-1

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this infor				
Debtor 1	Janis Ann Broum			
	First Name	Middle Name	Last Name	
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name	
, 3,				
Jnited States Ba	ankruptcy Court for the:	DIVISION	RICT OF CALIFORNIA, SACRAMENTO	
Case number				
if known)				☐ Check if this is an amended filing
Official Fo		n for Indi	viduals Filing Under Chapte	r 7 12/15
you are an ind	lividual filing under chap	oter 7, you must fil	ll out this form if:	
-	e claims secured by you	-	-	
ou must file th which	ever is earlier, unless the	ithin 30 days after	ot expired. you file your bankruptcy petition or by the date set for e time for cause. You must also send copies to the cre	
the for		in a joint case, ho	th are equally responsible for supplying correct inforn	nation. Both debtors must sig
	ate the form.	a joint case, bu	a. a. o oquany roopenionole for outprying correct inform	
e as complete	and accurate as possible	a If more snace is	needed, attach a separate sheet to this form. On the to	on of any additional pages
	our name and case num		s needed, attach a separate sheet to this form. On the ti	op or any additional pageo,
write y	your name and case num	nber (if known).	s needed, attach a separate sheet to this form. On the tr	op or any additional pages,
write y		nber (if known).	nieeded, attach a separate sheet to this form. On the tr	op or any additional pages,
write y Part 1: List Y For any credit	your name and case num Your Creditors Who Have tors that you listed in Pa	nber (if known).	creditors Who Have Claims Secured by Property (Of	
write y Part 1: List Y For any credit information b	your name and case num Your Creditors Who Have tors that you listed in Pa selow.	nber (if known). Secured Claims ort 1 of Schedule D	e: Creditors Who Have Claims Secured by Property (Of	ficial Form 106D), fill in the
write y Part 1: List Y For any credit information b	your name and case num Your Creditors Who Have tors that you listed in Pa	nber (if known). Secured Claims ort 1 of Schedule D		
Part 1: List Y For any credit information be identify the creation	your name and case num Your Creditors Who Have tors that you listed in Pa selow.	nber (if known). Secured Claims ort 1 of Schedule D	P: Creditors Who Have Claims Secured by Property (Of What do you intend to do with the property that secures a debt?	ficial Form 106D), fill in the Did you claim the property as exempt on Schedule C
Part 1: List Y For any credit information be Identify the concept of the concept	your name and case num Your Creditors Who Have tors that you listed in Pa selow.	nber (if known). Secured Claims ort 1 of Schedule D	D: Creditors Who Have Claims Secured by Property (Of What do you intend to do with the property that secures a debt?	ficial Form 106D), fill in the Did you claim the property
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For any creditinformation be Identify the control of property securing debt Creditor's	your name and case num 'our Creditors Who Have tors that you listed in Pa elow. reditor and the property the	nber (if known). Secured Claims ort 1 of Schedule D	Creditors Who Have Claims Secured by Property (Of What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	ficial Form 106D), fill in the Did you claim the propert as exempt on Schedule C
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Statement of Intention for Individuals Filing Under Chapter 7

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Official Form 108

page 1

Debtor 1 Broumley, Janis Ann		Case number (if known)	
name:		 ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. 	☐ Yes
property securing		☐ Retain the property and [explain]:	-
Part 2:	List Your Unexpired Personal Property	/ Logens	
For any until	expired personal property lease that y ation below. Do not list real estate leas	you listed in Schedule G: Executory Contracts and Unexpired Lees. Unexpired leases are leases that are still in effect; the lease se if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	eases (Official Form 106G), fill in e period has not yet ended. You
Describe y	our unexpired personal property leas	es	Will the lease be assumed?
Lessor's na Description Property:			□ No
r roperty.			☐ Yes
Lessor's na Description			□ No
Property:			☐ Yes
Lessor's na			□ No
Property:	To leased		☐ Yes
Lessor's na			□ No
Property:	TOT leased		☐ Yes
Lessor's na			□ No
Description Property:	n of leased		☐ Yes
Lessor's na			□ No
Description Property:	n of leased		☐ Yes
Lessor's na			□ No
Description Property:	n or leased		☐ Yes
Part 3:	Sign Below		
property th	lat is subject to an unexpired lease.	licated my intention about any property of my estate that secu	res a debt and any personal
$\mathbf{x} \mid \mathcal{Y}$	anis Brownley	X	
Janis	oszoEszzerce488 S Ann Broumley ture of Debtor 1	X Signature of Debtor 2	
	3/29/2016		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California, Sacramento Division

In		n Camorma, Sacram	Case N	n	
	brounney, vanis Ann	Debtor(s)	Chapter		
	DISCLOSURE OF COMPEN				
l.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankrupto	y, or agreed to be p	paid to me, for services	
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have received		\$	1,500.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
1.	■ I have not agreed to share the above-disclosed compen firm.	sation with any other perso	n unless they are n	nembers and associates	of my law
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				law firm. A
5.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspe	cts of the bankrupt	cy case, including:	
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statemc. Representation of the debtor at the meeting of creditorsd. [Other provisions as needed]	nent of affairs and plan whi	ch may be required	;	kruptcy;
б.	By agreement with the debtor(s), the above-disclosed fee demonstrates Motion work such as Motions to compel a	nd motions to redeem		hearings	
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding. 3/29/2016	Paul Bains	or payment to me f	or representation of the	debtor(s) in
-	Date	Pauldeep Bains Signature of Attorn Bankruptcy Law			
		1851 Heritage Li Sacramento, CA (707) 422-8500 paulb@bankrup Name of law firm	. 95815-4923 Fax: (888) 843-7	260	

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself			
		About Debtor 1:	Abou	nt Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for	Richard First name	Nico First	name
	example, your driver's	Anthony	Mar	e
	license or passport).	Middle name	Midd	e name
	Bring your picture identification to your meetir	og Pagan	Pag	an
	with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last	name and Suffix (Sr., Jr., II, III)
	All other names you have used in the last 8 years	Richard A Pagan	Nico	ole M Pagan ole M Sutherland ole Marie Sutherland
	Include your married or maiden names.	Richard Pagan	Nico	e Marie Sutherland le Pagan le Sutherland
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0929	xxx-	xx-7782

Debtor 1 Debtor 2

Pagan, Richard Anthony & Pagan, Nicole Marie

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live		If Debtor 2 lives at a different address:
		524 E Wigeon Way Suisun City, CA 94585-2146	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Solano County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Pagan, Richard Anthony & Pagan, Nicole Marie Case number (if known) Debtor 2 Part 2: Tell the Court About Your Bankruptcy Case The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form Bankruptcy Code you are 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details 8. How you will pay the fee about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When Case number District When District Case number 10. Are any bankruptcy cases ■ No pending or being filed by a spouse who is not filing Yes. this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you District When Case number, if known Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. □ No.

residence?

Yes.

Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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Debtor 1 Pagan, Richard Anthony & Pagan, Nicole Marie Case number (if known) Debtor 2 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 you a small business U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is alleged to pose a threat of Yes. imminent and identifiable What is the hazard? hazard to public health or safety? Or do you own If immediate attention is any property that needs needed, why is it needed? immediate attention?

EXHIBIT 3

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Debtor 2

Pagan, Richard Anthony & Pagan, Nicole Marie

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Debtor 2

Pagan, Richard Anthony & Pagan, Nicole Marie

Case number (if known)

ar	Answer These Question	ons for Re	porting Purposes				
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
		16b.	for a business or investment or the			ebts that you incurred to obtain money s or investment.	
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe th	at are not consumer	debts or busin	ness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	Go to line 18.			
Do you estimate that after any exempt property is excluded and			roperty is excluded and administrative expenses are				
	administrative expenses are paid that funds will be		■ No				
	available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-50,000	
	you estimate that you owe?	☐ 50-99		5001-10,000		50,001-100,000	
		<u> </u>		1 0,001-25,00	00	☐ More than100,000	
		200-9	99				
19.	How much do you	\$0 - \$	50,000	□ \$1,000,001 -		☐ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?	□ \$50,001 - \$100,000		\$10,000,001	□ \$1,000,000,001 - \$10 billion		
			001 - \$500,000	□ \$50,000,001 □ \$100,000,00			
		□ \$500,	001 - \$1 million	Δ ψ100,000,00	- ψ500 million	Word than \$50 billion	
20.	How much do you	\$0 - \$	50,000	□ \$1,000,001 -		☐ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?	□ \$50,0	001 - \$100,000	\$10,000,001		\$1,000,000,001 - \$10 billion	
			001 - \$500,000	□ \$50,000,001 □ \$100,000,00			
		□ \$500,	001 - \$1 million	Δ ψ100,000,00	- ψουο million	Word than \$50 billion	
ar	t7: Sign Below						
or	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
			chosen to file under Chapter 7, I and ode. I understand the relief available	•		gible, under Chapter 7, 11,12, or 13 of title 11, Unite to proceed under Chapter 7.	
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request	relief in accordance with the chap	ter of title 11, United	d States Code,	, specified in this petition.	
		underst casta can	signed by: and making a false statement, conc gresult indiges up to \$250,000, or in	ealing property, or on prisonment for up to	braining thomes o 20/1/12/15/01/1	polyproperty by fraud in connection with a bankruptcy boltnis V. Ryuss 152, 1341, 1519, and 3571.	
			TAnthony Pagan e of Debtor 1		Nicole Mari Signature of D		
		Executed	3/31/2016		Executed on	3/31/2016	
		LACCUIC			EXCOURED OIL		

page 6

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(230-2017)

| Case | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-2017 | 16-20

Debtor 1 Debtor 2 Pagan, Richard A	Anthony & Pagan, Nicole Marie	Case	e number (if known)		
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which \$ 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. Date 3/31/2016				
	Printed name Bankruptcy Law Group, PC Firm name				
	1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923 Number, Street, City, State & ZIP Code				
	Contact phone (707) 422-8500 268004 Bar number & State	Email address	paulb@bankruptcylg.com		

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Fill in this information to identify your case:					
Debtor 1	Richard Anthony	Pagan			
	First Name	Middle Name	Last Name		
Debtor 2	Nicole Marie Pag	an			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMEN	NTO	
Case number _					
(if known)					☐ Check if this is a
					amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	
		Value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,734.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	11,734.00
Pai	rt 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	9,500.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	28,824.92
	Your total liabilities	\$	38,324.92
Pai	rt 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	4,822.14
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,907.50
Pai	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your ot	har schadi	الا
	- 110. 100 hate hearing to report on the part of the form. One of the box and outshirt this form to the boart with your of	ioi donout	

- YesWhat kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debu		ragan, Richard Anthony & ragan, Nicole			
Debte	or 2	Marie Case number (f known)		
	_	Your debts are not primarily consumer debts. You have nothing to report on this part of th court with your other schedules.	e form. Check this box	and subm	nit this form to the
		n the Statement of Your Current Monthly Income: Copy your total current monthly income	from Official Form	\$	5,512.63

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	9,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	9,500.00

Debtor 2 (Spouse, if filing) United States Bankruptcy C Case number Official Form 10 Schedule A/E In each category, separately lithink it fits best. Be as complinformation. If more space is ranswer every question. Part 1: Describe Each Resident 1. Do you own or have any legal No. Go to Part 2. Yes. Where is the proper Part 2: Describe Your Vehice Do you own, lease, or have	Court for the: EAST 6A/B 8: Property st and describe items. ete and accurate as poneeded, attach a separate and accurate as poneeded, attach a separate interest ty? eles elegal or equitable interest ease a vehicle, also re	Middle Name Last Name Last Name ERN DISTRICT OF CALIFORNIA, SACRAMENTO List an asset only once. If an asset fits in more than ossible. If two married people are filing together, both ate sheet to this form. On the top of any additional part or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property? Interest in any vehicles, whether they are register aport it on Schedule G: Executory Contracts and University.	one category, list the asset in are equally responsible for sugges, write your name and case	pplying correct e number (if known).
Debtor 2 (Spouse, if filing) United States Bankruptcy Cocase number Official Form 10 Schedule A/E In each category, separately lithink it fits best. Be as complinformation. If more space is reasonable information. If more space is reasonab	Court for the: EAST 6A/B 8: Property st and describe items. ete and accurate as poneeded, attach a separate and accurate as poneeded, attach a separate interest ty? eles elegal or equitable interest ease a vehicle, also re	V List an asset only once. If an asset fits in more than ossible. If two married people are filing together, both ate sheet to this form. On the top of any additional part or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property? Interest in any vehicles, whether they are register aport it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it of the	one category, list the asset in are equally responsible for sugges, write your name and case	amended filing 12/15 the category where you pplying correct enumber (if known).
United States Bankruptcy Case number Official Form 10 Schedule A/E In each category, separately lithink it fits best. Be as complished formation. If more space is reasonable formation. Part 1: Describe Each Resident formation. Part 2: Describe Four Vehice formation formation. If more space is reasonable formation. If more sp	6A/B 3: Property st and describe items. ete and accurate as poneeded, attach a separatence, Building, Land, gal or equitable interesty? eles elegal or equitable in ease a vehicle, also re	Y List an asset only once. If an asset fits in more than ossible. If two married people are filing together, both ate sheet to this form. On the top of any additional part or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property: Interest in any vehicles, whether they are register aport it on Schedule G: Executory Contracts and University.	one category, list the asset in are equally responsible for sugges, write your name and case	amended filing 12/15 the category where you pplying correct enumber (if known).
Official Form 10 Schedule A/E In each category, separately lithink it fits best. Be as complinformation. If more space is ranswer every question. Part 1: Describe Each Resident of the proper of the	6A/B S: Property st and describe items. ete and accurate as poneeded, attach a separa dence, Building, Land, gal or equitable interes ety? eles elegal or equitable in ease a vehicle, also re	List an asset only once. If an asset fits in more than ossible. If two married people are filing together, both ate sheet to this form. On the top of any additional part or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property?	one category, list the asset in are equally responsible for sugges, write your name and case	amended filing 12/15 the category where you pplying correct enumber (if known).
Official Form 10 Schedule A/E In each category, separately lithink it fits best. Be as complinformation. If more space is reasonable information. If more space is reasonable information. If more space is reasonable information. Part 1: Describe Each Residual No. Go to Part 2. No. Go to Part 2. Yes. Where is the proper Part 2: Describe Your Vehice Someone else drives. If you less someone else drives. If you less yes. Acars, vans, trucks, traction No Yes 3.1 Make: Hyundai Elantra Year: 2004	st and describe items. ete and accurate as poneeded, attach a separatence, Building, Land, gal or equitable interes ety? eles elegal or equitable in ease a vehicle, also re	List an asset only once. If an asset fits in more than besible. If two married people are filing together, both rate sheet to this form. On the top of any additional part or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property? Interest in any vehicles, whether they are register aport it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the position of	are equally responsible for sugges, write your name and case	amended filing 12/15 the category where you pplying correct enumber (if known).
Official Form 10 Schedule A/E In each category, separately lithink it fits best. Be as complinformation. If more space is reasonable information. If more space is reasonable information. If more space is reasonable information. Part 1: Describe Each Residual No. Go to Part 2. No. Go to Part 2. Yes. Where is the proper Part 2: Describe Your Vehice Someone else drives. If you less someone else drives. If you less yes. Acars, vans, trucks, traction No Yes 3.1 Make: Hyundai Elantra Year: 2004	st and describe items. ete and accurate as poneeded, attach a separatence, Building, Land, gal or equitable interes ety? eles elegal or equitable in ease a vehicle, also re	List an asset only once. If an asset fits in more than besible. If two married people are filing together, both rate sheet to this form. On the top of any additional part or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property? Interest in any vehicles, whether they are register aport it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the position of	are equally responsible for sugges, write your name and case	amended filing 12/15 the category where you pplying correct enumber (if known).
In each category, separately lithink it fits best. Be as complinformation. If more space is referred in the proper space i	st and describe items. ete and accurate as poneeded, attach a separatence, Building, Land, gal or equitable interes ety? eles elegal or equitable in ease a vehicle, also re	List an asset only once. If an asset fits in more than besible. If two married people are filing together, both rate sheet to this form. On the top of any additional part or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property? Interest in any vehicles, whether they are register aport it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the position of	are equally responsible for sugges, write your name and case	the category where you pplying correct number (if known).
In each category, separately lithink it fits best. Be as complinformation. If more space is referred in the proper space i	st and describe items. ete and accurate as poneeded, attach a separatence, Building, Land, gal or equitable interes ety? eles elegal or equitable in ease a vehicle, also re	List an asset only once. If an asset fits in more than besible. If two married people are filing together, both rate sheet to this form. On the top of any additional part or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property? Interest in any vehicles, whether they are register aport it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the position of	are equally responsible for sugges, write your name and case	the category where you pplying correct number (if known).
In each category, separately lithink it fits best. Be as complinformation. If more space is referred in the proper space i	st and describe items. ete and accurate as poneeded, attach a separatence, Building, Land, gal or equitable interes ety? eles elegal or equitable in ease a vehicle, also re	List an asset only once. If an asset fits in more than besible. If two married people are filing together, both rate sheet to this form. On the top of any additional part or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property? Interest in any vehicles, whether they are register aport it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the position of	are equally responsible for sugges, write your name and case	the category where you pplying correct number (if known).
In each category, separately lithink it fits best. Be as compliance in formation. If more space is a Answer every question. Part 1: Describe Each Resident 1. Do you own or have any lead 1. No. Go to Part 2. Yes. Where is the proper Part 2: Describe Your Vehice 1. Do you own, lease, or have someone else drives. If you lead 1. No Yes 3. Cars, vans, trucks, traction 1. Make: Hyundai Model: Year: 2004	st and describe items. ete and accurate as poneeded, attach a separatence, Building, Land, gal or equitable interes ty? eles e legal or equitable in ease a vehicle, also re	List an asset only once. If an asset fits in more than besible. If two married people are filing together, both rate sheet to this form. On the top of any additional part or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property? Interest in any vehicles, whether they are register aport it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the port it on Schedule G: Executory Contracts and University of the position of	are equally responsible for sugges, write your name and case	the category where you pplying correct number (if known).
think it fits best. Be as compliniformation. If more space is referenced in the proper space in	ete and accurate as poneeded, attach a separatence, Building, Land, gal or equitable interesty? eles e legal or equitable in ease a vehicle, also re	possible. If two married people are filing together, both rate sheet to this form. On the top of any additional part or Other Real Estate You Own or Have an Interest In st in any residence, building, land, or similar property? Interest in any vehicles, whether they are register aport it on Schedule G: Executory Contracts and University of the second	are equally responsible for sugges, write your name and case	pplying correct e number (if known).
1. Do you own or have any lead of the proper	gal or equitable interes ty? les legal or equitable interes	et in any residence, building, land, or similar property? Interest in any vehicles, whether they are registed eport it on Schedule G: Executory Contracts and University.	ered or not? Include any vehi	icles you own that
No. Go to Part 2. Yes. Where is the proper Part 2: Describe Your Vehice Do you own, lease, or have someone else drives. If you lead to the proper of the	ty? eles e legal or equitable in ease a vehicle, also re	nterest in any vehicles, whether they are registe port it on Schedule G: Executory Contracts and Un	ered or not? Include any vehi	icles you own that
No. Go to Part 2. Yes. Where is the proper Part 2: Describe Your Vehice Do you own, lease, or have someone else drives. If you lead to the proper of the	ty? eles e legal or equitable in ease a vehicle, also re	nterest in any vehicles, whether they are registe port it on Schedule G: Executory Contracts and Un	ered or not? Include any vehi	icles you own that
Part 2: Describe Your Vehice Do you own, lease, or have someone else drives. If you lead to the someone of the	e legal or equitable in ease a vehicle, also re	port it on Schedule G: Executory Contracts and Un		icles you own that
Describe Your Vehice Do you own, lease, or have someone else drives. If you le someone else drives are trucks, tract of the yes 3. Cars, vans, trucks, tract of the yes 3.1 Make: Hyundai Hyundai Elantra Year: 2004	e legal or equitable in ease a vehicle, also re	port it on Schedule G: Executory Contracts and Un		icles you own that
Do you own, lease, or have someone else drives. If you le 3. Cars, vans, trucks, tract No Yes 3.1 Make: Hyundai Model: Elantra Year: 2004	e legal or equitable in ease a vehicle, also re	port it on Schedule G: Executory Contracts and Un		icles you own that
Someone else drives. If you le 3. Cars, vans, trucks, tract No Yes 3.1 Make: Hyundai Model: Elantra Year: 2004	ease a vehicle, also re	port it on Schedule G: Executory Contracts and Un		icles you own that
Model: Elantra Year: 2004			Do not deduct secured cl	laims or exemptions. But
Year: 2004		Who has an interest in the property? Check one	the amount of any secure	ed claims on Schedule D:
		■ Debtor 1 only □ Debtor 2 only		ims Secured by Property.
	170000	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other information:		lacksquare At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$895.00	\$895.00
3.2 Make: Chevrole			Do not deduct secured of	laims or exemptions. Put
3.2 Make: Cnevrole		Who has an interest in the property? Check one ☐ Debtor 1 only	the amount of any secure	ed claims on Schedule D: ims Secured by Property.
Year: 2006	<u>, </u>	■ Debtor 2 only		
Approximate mileage:	107498	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other information:		☐ At least one of the debtors and another		
Has not been driv	en for over 1	Check if this is community property (see instructions)	\$3,436.00	\$3,436.00
		d other recreational vehicles, other vehicles, and		
■ No		ercraft, fishing vessels, snowmobiles, motorcycle ac		

Debtor 1 Debtor 2 Pagan, Rick	nard Anthony & Pagan, Nicole Marie Case number (if known)	
	f the portion you own for all of your entries from Part 2, including any entries for pages Part 2. Write that number here=>	\$4,331.00
Part 3: Describe Your Pers	onal and Household Items	
	legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No	furnishings aces, furniture, linens, china, kitchenware	ciains of exemptions.
Yes. Describe	Household Goods	\$2,500.00
	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collect Il phones, cameras, media players, games	tions; electronic devices
	Electronics	\$1,500.00
	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or be memorabilia, collectibles	paseball card collections; other
9. Equipment for sports a Examples: Sports, photo instruments☐ No☐ Yes. Describe	nd hobbies ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and k	rayaks; carpentry tools; musical
	Children's Toys	\$500.00
■ No □ Yes. Describe 11. Clothes	s, shotguns, ammunition, and related equipment othes, furs, leather coats, designer wear, shoes, accessories Clothing	\$2,000.00
	Ciotning	\$2,000.00
12. Jewelry Examples: Everyday je □ No ■ Yes. Describe	welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, s	
	Jewelry	\$500.00
 13. Non-farm animals Examples: Dogs, cats, No Yes. Describe 14. Any other personal and No 	birds, horses d household items you did not already list, including any health aids you did not list	

■ No

	ebtor 1 ebtor 2	Pagan, Ri	chard Anthony & Pagan, Nic	cole Marie	Case number (if kn	nown)
	☐ Yes			Institution name or	individual:	
23.	■ No		for a periodic payment of money to	you, either for life or for a	a number of years)	
	☐ Yes		Issuer name and description.			
24.			tion IRA, in an account in a qual), 529A(b), and 529(b)(1).	ified ABLE program, or	under a qualified state tuition	program.
	☐ Yes		Institution name and description. S	Separately file the records	of any interests.11 U.S.C. § 521	(c):
25.	Trusts, ■ No	equitable or	future interests in property (other	er than anything listed i	in line 1), and rights or powers	exercisable for your benefit
	☐ Yes.	Give specific	information about them			
26.			trademarks, trade secrets, and comain names, websites, proceeds f			
		Give specific	information about them			
27.			s, and other general intangibles permits, exclusive licenses, coopera	tive association holdings,	liquor licenses, professional licer	nses
	☐ Yes.	Give specific	information about them			
M	oney or p	property owe	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	■ No	inds owed to	you nformation about them, including wh	nether you already filed th	e returns and the tax years	
29.	■ No	les: Past due	or lump sum alimony, spousal sup	port, child support, main	tenance, divorce settlement, pro	perty settlement
30	Example ■ No	<i>les:</i> Unpaid wa	eone owes you ages, disability insurance payments ans you made to someone else information	, disability benefits, sick μ	pay, vacation pay, workers' comp	ensation, Social Security benefits;
31.		s in insurand les: Health, di	ce policies sability, or life insurance; health sav	ings account (HSA); cred	dit, homeowner's, or renter's insur	ance
	■ No □ Yes. N	lame the insu	rance company of each policy and l Company name:	ist its value.	Beneficiary:	Surrender or refund value:
32.			erty that is due you from someon iary of a living trust, expect proceed		olicy, or are currently entitled to red	ceive property because someone has
	☐ Yes.	Give specific	information			
33.	Example ■ No	les: Accidents	parties, whether or not you have s, employment disputes, insurance		e a demand for payment	
Off	☐ Yes. ficial Form	Describe eac	h claim	Schedule A/B: Property		page 4
011		- 100A/D		Concurred AVD. FTOPETTY		page 4

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Debtor 1 Debtor 2	Pagan, Richard Anthony & Pagan, Nicole Marie	•	Case number (if known)	
	r contingent and unliquidated claims of every nature, inclu	ding counterclaims of	the debtor and rights to s	et off claims
■ No				
□ Ye	s. Describe each claim			
_	inancial assets you did not already list			
■ No				
∐ Ye	s. Give specific information			
	I the dollar value of all of your entries from Part 4, includint 4. Write that number here			\$403.00
Part 5:	Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real estat	te in Part 1.	
■ No.	u own or have any legal or equitable interest in any business-relat Go to Part 6. Go to line 38.	ed property?		
	Describe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.			
	ou own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
-	o. Go to Part 7.			
ЦY	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Abovo		
rait 1.	Describe All Property Tou Own of have all litterest in That To	d Did Not List Above		
Exa	ou have other property of any kind you did not already list mples: Season tickets, country club membership	?		
■ No				
⊔ Ye	s. Give specific information			
54. Ad	I the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Pa i	t 1: Total real estate, line 2			\$0.00
56. Pa r	t 2: Total vehicles, line 5	\$4,331.00		
57. Pa	t 3: Total personal and household items, line 15	\$7,000.00		
58. Pa	t 4: Total financial assets, line 36	\$403.00		
59. Pa ı	t 5: Total business-related property, line 45	\$0.00		
60. Pa	t 6: Total farm- and fishing-related property, line 52	\$0.00		
	t 7: Total other property not listed, line 54	+ \$0.00		
62. To t	al personal property. Add lines 56 through 61	\$11,734.00	Copy personal property to	tal \$11,734.00
63. To f	al of all property on Schedule A/B. Add line 55 + line 62			\$11,734.00

Vehicle Appraisal

Page 1 of 1



DATE: 3/22/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

Edmunds.com TMV®

VEHICLE INFORMATION:

YEAR: 2004 CONDITION: Average

MAKE: Hyundai MILEAGE: 170000

MODEL: Elantra ZIP CODE: 94585

STYLE: GLS 4dr Sedan (2.0L 4cyl 4A)

OPTIONS:

RETAIL TRADE IN PRIVATE PARTY \$1,688.00 \$420.00 \$895.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any

DATA PROVIDED BY

options. (If no Zip Code was provided, this price is the national price.)



Vehicle Appraisal

Page 1 of 1



DATE: 3/22/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

VEHICLE INFORMATION:

YEAR: 2006 CONDITION: Rough

MAKE: Chevrolet MILEAGE: 107498

MODEL: Colorado ZIP CODE: 94585

STYLE: LT 4dr Extended Cab SB (2.8L

4cyl 5M)

OPTIONS:

RETAIL

TRADE IN

PRIVATE PARTY

Edmunds.com TMV®

\$4,382.00

\$2,877.00

\$3,436.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any options. (If no Zip Code was provided, this price is the national price.)

DATA PROVIDED BY



Debtor 1	Richard Anthony	[,] Pagan		
	First Name	Middle Name	Last Name	—)
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	_)
Jnited States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENTO	
Case number f known)				☐ Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt
4 14/1-1-	ab and of accounting a constant of the constan

- Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

* * * * * * * * * * * * * * * * * * * *	•	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exemp
	Copy the value from Schedule A/B	Check only one box for each exemption.
ebtor 1 Exemptions Hyundai Elantra 2004 170000	\$895.00	\$895.00 CCCP § 703.140(b)(5) 100% of fair market value, up to any applicable statutory limit
Chevrolet Colorado	\$3,436.00	■ \$3,436.00 CCCP § 703.140(b)(2)
2006 107498 Line from <i>Schedule A/B</i> : 3.2		□ 100% of fair market value, up to any applicable statutory limit
Household Goods Line from Schedule A/B 6.1	\$2,500.00	\$2,500.00 CCCP § 703.140(b)(3)
Ellie Holli Genedale AVE G.1		□ 100% of fair market value, up to any applicable statutory limit
Electronics Line from Schedule A/B 7.1	\$1,500.00	© \$455.00 CCCP § 703.140(b)(5)
Elio Holli dolloddio 772 FFT		□ 100% of fair market value, up to any applicable statutory limit

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own			Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Electronics Line from Schedule A/B 7.1	\$1,500.00		\$1,045.00	CCCP § 703.140(b)(5)
Life non our cause A/A 1.1			100% of fair market value, up to any applicable statutory limit	
Children's Toys	\$500.00	•	\$500.00	CCCP § 703.140(b)(3)
			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B. 11.1	\$2,000.00		\$2,000.00	CCCP § 703.140(b)(3)
and non garage ALL III.			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B. 12.1	\$500.00		\$500.00	CCCP § 703.140(b)(4)
Line nom Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
Cash on Hand Line from Schedule A/B 16.1	\$3.00		\$3.00	CCCP § 703.140(b)(5)
the non-our outre ver ion			100% of fair market value, up to any applicable statutory limit	
Mechanics Bank 1923 Line from Schedule A/B 17.1	\$200.00		\$200.00	CCCP § 703.140(b)(5)
Line nom Schedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	
Mechanics Bank Line from Schedule A/B 17.2	\$100.00		\$100.00	CCCP § 703.140(b)(5)
Line Holl Schedule A/B. 17.2			100% of fair market value, up to any applicable statutory limit	
Mechanics Bank ine from Schedule A/B 17.3	\$100.00		\$100.00	CCCP § 703.140(b)(5)
and noninguitable PVD. 11.0			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption Subject to adjustment on 4/01/16 and every 3			on or after the date of adjustment.)	
Yes. Did you acquire the property covere□ No	d by the exemption within	า 1,21	5 days before you filed this case?	

Fill	l in this infor	mation to identify your	case:		
De	btor 1				7
		First Name	Middle Name	Last Name	}
1 1	btor 2 ouse if, filing)	Nicole Marie Pag	gan Middle Name	Last Name	
(Spi	ouse II, IIIIIIg)	i iist ivaine			
Un	ited States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF C	CALIFORNIA, SACRAMENTO	
	se number nown)				☐ Check if this is an amended filing
Of	fficial Fo	orm 106C			
S	chedul	e C: The Pr	operty You Cla	aim as Exempt	12/15
propout	oerty you listed	d on <i>Schedule A/B: Prop</i>	erty (Official Form 106A/B) as y	ogether, both are equally responsible for su your source, list the property that you claim a necessary. On the top of any additional page	as exempt. If more space is needed, fill
functo a	ds—may be i particular di licable statu	unlimited in dollar amo	unt. However, if you claim an alue of the property is determ	llth aids, rights to receive certain benefi I exemption of 100% of fair market value hined to exceed that amount, your exem	under a law that limits the exemption
1.	Which set o	of exemptions are you c	laiming? Check one only, eve	n if your spouse is filing with you.	
	■ You are c	laiming state and federal	nonbankruptcy exemptions. 11	1 U.S.C. § 522(b)(3)	
	☐ You are c	laiming federal exemption	s. 11 U.S.C. § 522(b)(2)		
2.	For any pro	perty you list on Sched	dule A/B that you claim as exe	empt, fill in the information below.	
		tion of the property and lin ∃ that lists this property	ne on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
De	btor 2 Exe				
	Brief descrip Line from Sc				
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		☐ 100% of fair market value, up to any applicable statutory limit	
3.	(Subject to a	djustment on 4/01/16 and	. ,	ses filed on or after the date of adjustment.)	
	_	a you acquire the propert No	y covered by the exemption with	nin 1,215 days before you filed this case?	
	_	res			

Official Form 106C

DocuSign Envelope ID: E3C947AF-3E9D-4AE7-A17C-7557140FB747

Fill in this inform					
Debtor 1 Richard Anthony Pagan					
	First Name	Middle Name	Last Name)	
Debtor 2	Nicole Marie Pag	an			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION			NTO		
Case number _ (if known)					☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Fill i	n this infor	mation to identify your case:					
Debt	tor 1	Richard Anthony Pag	an				
		First Name	Middle Name	Last Name			
Debt		Nicole Marie Pagan					
(Spous	se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Ba		STERN DISTRI VISION	CT OF CALIFORNIA, SACRAM	ENTO		
Case	e number						
(if kno	wn)					_	if this is an ded filing
Offic	cial For	m 106E/F					
		E/F: Creditors Who	Have Uns	secured Claims			12/15
any ex Sched D: Cre the Co case r	xecutory condule G: Executors Who lontinuation Forumber (if kn	ntracts or unexpired leases that of utory Contracts and Unexpired L Have Claims Secured by Propert Page to this page. If you have no nown). All of Your PRIORITY Unsecu	could result in a c leases (Official Forty). If more space information to re ired Claims	vith PRIORITY claims and Part 2 fo claim. Also list executory contract orm 106G). Do not include any cre- is needed, copy the Part you need eport in a Part, do not file that Part.	s on Schedule A/B: P ditors with partially se , fill it out, number the	roperty (Official For ecured claims that a e entries in the boxe	n 106A/B) and on re listed in Schedule s on the left. Attach
_		tors have priority unsecured clai	ms against you?				
L	☐ No. Go to I	Part 2.					
	Yes.						
ic p 1	dentify what to cossible, list the cossible is the cost of the cos	ype of claim it is. If a claim has bot	h priority and nonp ording to the credi im, list the other c		nd show both priority a	nd nonpriority amount aims, fill out the Conti Priority	s. As much as nuation Page of Part Nonpriority
	1.1		1 4 4 . 1	. Marie de la constantina	40 500 00	amount	amount
2.1		al Revenue Service reditor's Name	Last 4 di	gits of account number	\$9,500.00	\$9,500.00	\$0.00
	1 Honey C	round o Hamo	When wa	s the debt incurred?			
		x 7346 elphia, PA 19101-7346 Street City State Zlp Code	 As of the	date you file, the claim is: Check a	all that apply	-	
	Who incurre	ed the debt? Check one.	☐ Contir	ngent			
	Debtor 1	only	☐ Unliqu	iidated			
	Debtor 2	only	☐ Dispu	ted			
	Debtor 1	and Debtor 2 only	Type of F	PRIORITY unsecured claim:			
	_	one of the debtors and another	☐ Dome	stic support obligations			
	Chock if	this claim is for a community de	Taxes	and certain other debts you owe the	government		
		subject to offset?		s for death or personal injury while yo	ou were intoxicated		
	No No	subject to onset:	☐ Other	Specify			
	☐ Yes						-
Part	2: List A	All of Your NONPRIORITY Un	secured Claims	3			
3. D	Oo any credit	tors have nonpriority unsecured	claims against y	ou?			
	☐ No. You ha	ave nothing to report in this part. So	ubmit this form to t	the court with your other schedules.			
ı	Yes.						
u	insecured cla han one credi	im, list the creditor separately for e	ach claim. For eac	al order of the creditor who holds of the claim listed, identify what type of control of the credit of the cre	laim it is. Do not list cla	ims already included	in Part 1. If more

Total claim

Debto		Nicole Marie	Case number (f know)	
4.1	AFNI, Inc	Last 4 digits of account number	7470	\$240.00
	Nonpriority Creditor's Name	When was the debt incurred?		
	PO Box 3427 Bloomington, IL 61702-3427 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	-
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify		-
4.2	CBA Collection Bureau Nonpriority Creditor's Name	Last 4 digits of account number	4228	\$2,211.69
		When was the debt incurred?		_
	25954 Eden Landing Rd # 15667629 Hayward, CA 94545-3816			
	Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only			
	_	Contingent		
	■ Debtor 2 only□ Debtor 1 and Debtor 2 only	☐ Unliquidated		
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□Yes	Other. Specify		
$\overline{}$				-
4.3	Credit Bureau Associates	Last 4 digits of account number	0090	\$2,242.00
	Nonpriority Creditor's Name	When was the debt incurred?		
	PO Box 150460			•
	Fairfield, CA 94533-0150 Number Street City State Zlp Code	As of the date you file, the claim	e. Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	5. Спеск ан тат арру	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		_

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Discover Financial	Somioso IIC	Last 4 digits of account number	4622	¢0 000 57
Discover Financial Nonpriority Creditor's Name		-	4022	\$9,998.57
DO D . 45040		When was the debt incurred?		
PO Box 15316 Wilmington, DE 198	50-5316			
Number Street City State Z	p Code	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt?	heck one.			
Debtor 1 only		☐ Contingent		
Debtor 2 only		Unliquidated		
Debtor 1 and Debtor 2 o	•	Disputed		
At least one of the debte		Type of NONPRIORITY unsecured ☐ Student loans	i claim:	
☐ Check if this claim is f	or a community	_	ration agreement or divorce that you did not	
Is the claim subject to off	set?	report as priority claims	ration agreement or divorce that you did not	
■ No		Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes		Other. Specify Lawsuit FC	M148794	
DSNB/Macy's		Last 4 digits of account number	4443	\$2,000.00
Nonpriority Creditor's Name)	When was the debt incurred?		·
PO Box 8218		when was the dept incurred?		
Mason, OH 45040-8		_		
Number Street City State Z	-	As of the date you file, the claim is	s: Check all that apply	
Who incurred the debt?	heck one.	_		
■ Debtor 1 only		☐ Contingent		
Debtor 2 only		☐ Unliquidated		
Debtor 1 and Debtor 2 o	,	☐ Disputed Type of NONPRIORITY unsecured	l claim:	
At least one of the debte		Student loans	r Claim.	
☐ Check if this claim is f debt	or a community		ration agreement or divorce that you did not	
Is the claim subject to off	set?	report as priority claims		
■ No		Debts to pension or profit-sharing	g plans, and other similar debts	
Yes		Other. Specify		
Estate Information	Services, LLC	Last 4 digits of account number	8349	\$12,132.66
Nonpriority Creditor's Name	•	When was the debt incurred?		
PO Box 1730		When was the dest incurred:		
Reynoldsburg, OH				
Number Street City State Z Who incurred the debt? (•	As of the date you file, the claim is	s: Check all that apply	
Debtor 1 only		☐ Contingent		
Debtor 2 only		☐ Unliquidated		
Debtor 1 and Debtor 2 of	only	☐ Disputed		
☐ At least one of the debte	ors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is f	or a community	Student loans		
debt Is the claim subject to off	set?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No		Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes		Other. Specify		

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Debtor 2 Pagan, Richard Anthony & Pag	gan, Nicole Marie	Case number (f know)
Name and Address Department of Justice Tax Division Ben Franklin Station PO Box 683 Washington, DC 20044-0683	On which entry in Part 1 or Part 2 d Line 2.1 of (<i>Check one</i>):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Suttell, Hammer & White Attorney for Discover Bank	Last 4 digits of account number On which entry in Part 1 or Part 2 d Line 4.4 of (Check one):	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
PO Box C-90005 Bellevue, WA 98009	Last 4 digits of account number	4622
Name and Address Universal Card/Citibank PO Box 6241 Sioux Falls, SD 57117-6241	On which entry in Part 1 or Part 2 d Line 4.6 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 8349
Name and Address US Attorney (For IRS) 501 I St Ste 10-100 Sacramento, CA 95814-7300	On which entry in Part 1 or Part 2 did you list the original creditor? Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.500.00
nom rait i		• •		Φ	9,500.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	9,500.00
					Total Claim
T. (.)	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	28,824.92
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	28,824.92

Fill in this inform						
Debtor 1	Richard Anthony	Richard Anthony Pagan				
	First Name	Middle Name	Last Name)		
Debtor 2	or 2 Nicole Marie Pagan					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA, SA DIVISION			F CALIFORNIA, SACRAMENT	то		
Case number						
(if known)				☐ Check if t amended		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person of	r company with	whom you have the	contract or lease	State what the contract or lease is for
2.1		Name, Number	r, Street, City, State and ZIP	Code	
2.1	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					<u> </u>
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIF Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.4	Oity		Oldio	211 0000	
	Name				_
	Number	Street			_
	City		04-4-	710.0-4-	_
2.5	City		State	ZIP Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Fill in this infor	rmation to identify your	2250			
Debtor 1	Richard Anthony First Name	Pagan Middle Name	Last Name		
Debtor 2	Nicole Marie Pag	an			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT OF O	CALIFORNIA, SACRA	AMENTO	
Case number					
(if known)					☐ Check if this is an amended filing
	orm 106H	1.4			
Schedule	H: Your Cod	ebtors			12/15
are filing togeth and number the	er, both are equally resp	onsible for supplying corre the left. Attach the Addition	ct information. If me	ore space is needed, copy the	ossible. If two married people e Additional Page, fill it out, il Pages, write your name and
1. Do you h	nave any codebtors? (If y	ou are filing a joint case, do no	ot list either spouse as	s a codebtor.	
■ No □ Yes					
		lived in a community prope New Mexico, Puerto Rico, Te		/? (Community property states and Wisconsin.)	and territories include Arizona,
_		,	, ,	,	
□ No. Go to		1 1 1 1 1 1 1 1			
■ Yes. Did	your spouse, former spous	se, or legal equivalent live with	you at the time?		
■ No	-				
	In which community state	or territory did you live?	-NONE-	. Fill in the name and curr	ent address of that person.
	Name of your spouse, former sp	ouse, or legal equivalent			
	Number, Street, City, State & Zij				
line 2 agair	n as a codebtor only if th	at person is a guarantor or	cosigner. Make sure		ou. List the person shown in on Schedule D (Official Form or Schedule G to fill out
	mn 1: Your codebtor Number, Street, City, State and Z	IP Code		Column 2: The creditor to Check all schedules that	o whom you owe the debt apply:
3.1				☐ Schedule D, line	
Name				Schedule E/F, line	
				☐ Schedule G, line	
Numbe	er Street			_	
City		State	ZIP Code		
3.2 Name				Schedule D, line	
ivaille				☐ Schedule E/F, line ☐ Schedule G, line	
				— Scriedule 6, little —	
Numbe City	er Street	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com Schedule H: Your Codebtors

Fill in this informa	tion to identify your cas	e:	
Debtor 1	Richard Anth	ony Pagan	_
Debtor 2 (Spouse, if filing)	Nicole Marie	Pagan	
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION	
Case number (If known)			Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13
Official Fo			income as of the following date: MM / DD/ YYYY
Schedule	I: Your Inco	me	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment **Debtor 1** Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ☐ Not employed ■ Not employed information about additional employers. Occupation **Appliance Tech Back Office / Receptionist** Include part-time, seasonal, or Employer's name **Precision Services** self-employed work. Solano Eye Care Occupation may include student or Employer's address 2820 Broadmoor Ave 1329 Oliver Rd homemaker, if it applies. Concord, CA 94520-4717 Fairfield, CA 94534-3470 How long employed there? 8 months 1 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 3.774.23 1.573.38 2. 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 3. Calculate gross Income. Add line 2 + line 3. 3,774.23 1,573.38

Official Form 106I Schedule I: Your Income page 1

Debt Debt		Pagan, Richard Anthony & Pagan, Nicole Marie	_	Case	number (if known)			
				For	Debtor 1	For Debtor		
	Сору	/ line 4 here	4.	\$	3,774.23	\$1	,573.38	
5.	List a	all payroll deductions:						
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a. 5b.	\$_ \$_	569.72 0.00	\$	155.75 0.00	
	5c. 5d. 5e.	Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance	5c. 5d. 5e.	\$_ \$_	0.00 0.00 0.00	\$ \$	0.00 0.00 0.00	
	5f. 5g.	Domestic support obligations Union dues	5f. 5g.	\$ \$	0.00	\$	0.00	
_	5h.	Other deductions. Specify:	— ^{5h.+}	· —	0.00		0.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ <u> </u>	569.72	\$	155.75	
7. 8.		ulate total monthly take-home pay. Subtract line 6 from line 4. all other income regularly received: Net income from rental property and from operating a business,	7.	\$	3,204.51	\$ <u>1</u>	<u>,417.63</u>	
	oa.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce						
		settlement, and property settlement.	8c.	\$_	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	0.00	
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8e. 8f.	\$_ \$	0.00	\$\$	0.00	
	8g.	Pension or retirement income	— 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$;	3,204.51 + \$_	1,417.63	= \$ 4	,622.14
11.	Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your defriends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not availy: Mother-in-Law's Contribution	ependen		,		+\$	200.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					\$4	,822.14
13.	Do y∈	ou expect an increase or decrease within the year after you file this form? No.	?				Combined monthly in	
	П	Yes, Explain:						

Official Form 106I Schedule I: Your Income page 2

Sill	in this information to identify your case:				
	tor 1 Richard Anthony Pagan		Checl	c if this is:	
Doh			_	An amended filing	ina nastratitian ahantar 1
	ouse, if filing) Nicole Marie Pagan			expenses as of the	ring postpetition chapter 1 following date:
Unit	ed States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFO SACRAMENTO DIVISION	RNIA,	1	MM / DD / YYYY	
	e numbernown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/
info					
1.	Is this a joint case? ☐ No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	■ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses to	for Separate Household	dof Debtor	2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the				□No
	dependents names.	Daughter		5	■ Yes □ No
		Daughter		2	■ Yes
					□ No
					☐ Yes
					□ No □ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?				_ 100
exp	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless your says as of a date after the bankruptcy is filed. If this is a supple blicable date.				
val	lude expenses paid for with non-cash government assistance if your long such assistance and have included it on Schedule I: Your longical Form 1061.)	you know the ncome		Your exp	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	4. \$		1,700.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses4d. Homeowner's association or condominium dues		4c. \$ 4d. \$		0.00
5.	Additional mortgage payments for your residence, such as home	ne equity loans	4a. \$ 5. \$		0.00

Official Form 106J Schedule J: Your Expenses page 1

۰,	Pagan, Richard Anthony & Pagan, Nicole Marie		ber (if known)	
	Utilities:		•	
	6a. Electricity, heat, natural gas	6a.	·	300.00
	6b. Water, sewer, garbage collection	6b.		160.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	350.00
	6d. Other. Specify:	6d.	\$	0.00
	Food and housekeeping supplies	7.	\$	1,100.00
	Childcare and children's education costs	8.	\$	25.00
	Clothing, laundry, and dry cleaning	9.	\$	200.00
	Personal care products and services	10.	\$	150.00
	Medical and dental expenses	11.	\$	75.00
	Transportation. Include gas, maintenance, bus or train fare.	12.	¢	300.00
	Do not include car payments.			
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00
	Charitable contributions and religious donations	14.	\$	0.00
	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	·	250.00
	15c. Vehicle insurance	15c.	\$	60.00
	15d. Other insurance. Specify:	15d.	\$	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		<u> </u>	0.00
	Specify:	16.	\$	0.00
	Installment or lease payments:	47-	•	
	17a. Car payments for Vehicle 1	17a.	· ———	0.00
	17b. Car payments for Vehicle 2	17b.	·	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
	Your payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you.	10.	\$	0.00
	Specify:	19.	Ψ	0.00
	Other real property expenses not included in lines 4 or 5 of this form or on Scheo		r Income.	
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	·	0.00
	Other: Specify: Auto Registration	21.	·	37.50
				07.00
	Calculate your monthly expenses		_	
	22a. Add lines 4 through 21.		\$	4,907.50
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,907.50
	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,822.14
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	4,907.50
	23c. Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	-85.36

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

■ Yes. Explain here: Joint Debtor's Mother lives with Debtors. Her expenses are included above.

Fill in this infor	mation to identify your	case:			
Debtor 1	Richard Anthony	Pagan			
	First Name	Middle Name	Last Name		
Debtor 2	Nicole Marie Pag	an			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAME	ENTO	
Case number (if known)					☐ Check if this is amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below					
Did yo	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?					
I	No					
	/es. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)				
x 1	penalty of perjury, I declare that I have read the summary and sc ey are true and correct. What I have X	hedules filed with this declaration and Mode Marie Pagan				
	chard Anthony Pagan	Nicole Marie Pagan				
Sig	gnature of Debtor 1	Signature of Debtor 2				
De	3/31/2016 ate	3/31/2016 Date				
טכ	ale	Date				

AFNI, Inc PO Box 3427 Bloomington, IL 61702-3427

CBA Collection Bureau 25954 Eden Landing Rd # 15667629 Hayward, CA 94545-3816

Credit Bureau Associates PO Box 150460 Fairfield, CA 94533-0150

Department of Justice Tax Division Ben Franklin Station PO Box 683 Washington, DC 20044-0683

Discover Financial Services, LLC PO Box 15316 Wilmington, DE 19850-5316

DSNB/Macy's PO Box 8218 Mason, OH 45040-8218

Estate Information Services, LLC PO Box 1730 Reynoldsburg, OH 43068-8730

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Suttell, Hammer & White Attorney for Discover Bank PO Box C-90005 Bellevue, WA 98009

Universal Card/Citibank PO Box 6241 Sioux Falls, SD 57117-6241

US Attorney (For IRS) 501 I St Ste 10-100 Sacramento, CA 95814-7300

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying co information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name a (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?	12/1
Debtor 2 (Spouse if, filing) Nicole Marie Pagan First Name Middle Name Last Name Last Name Last Name United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION Case number (if known) Check if amende Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying co information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name a (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?	12/1
Debtor 2 (Spouse if, filing) Nicole Marie Pagan First Name Middle Name Last Name Last Name Last Name Last Name Last Name Last Name Last Name Case number (if known) Case number (if known) Check if amende Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying co information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name a (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?	12/1
Check if amende Check if a	12/1
United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION Case number (if known) Check if amende Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying co information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name a (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?	12/1
Case number Check if amende Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying co information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name a (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?	12/1
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying co information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name a (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?	12/1
Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying co information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name a (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?	correct
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying co information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name a (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?	correct
information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name a (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status?	
1. What is your current marital status?	
_	
■ Married □ Not married	
□ Not married	
 □ No ■ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. 	
	ites Debtor 2 ed there
0	Same as Debtor 1 om-To:
3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income	
 4. Did you have any income from employment or from operating a business during this year or the two previous calendar year Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No 	ars?
Yes. Fill in the details.	
Debtor 1 Debtor 2	
Sources of income Check all that apply. Gross income (before deductions and Check all that apply. Gross income (before deductions and Check all that apply.	ross income efore deductions ad exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Pagan, Richard Anthony & Pagan, Nicole Marie Case number (if known) Debtor 2 Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and (before deductions Check all that apply. Check all that apply. exclusions) and exclusions) From January 1 of current year until \$9,186.58 \$3,779.83 ☐ Wages, commissions, ■ Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$14,135.00 For last calendar year: \$26,515.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$7,606.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. **Debtor 1** Debtor 2 **Gross income** Sources of income **Gross income** Sources of income Describe below.. (before deductions and Describe below. (before deductions exclusions) and exclusions) From January 1 of current year until 2016 - Tax Refund \$2,709.00 the date you filed for bankruptcy: from 2015 Tax Return Fed: \$2,115 State: \$594 For last calendar year: \$8,290.00 2015 Pension (Joint) (January 1 to December 31, 2015) For the calendar year before that: 2014 401K Cash Out \$120,000.00 (January 1 to December 31, 2014) 2014 Unemployment \$2,896.00 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Official Form 107

Debtor 1

* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

	tor 1 tor 2 Pa	igan, Rich	ard Anthony & Paç	gan, Nicole Marie	Cas	se number (if known)		
	Yes.			ve primarily consumer de		f \$600 or more?		
		_	,		, ,	,		
		■ No. □ Yes		or to whom you paid a total c support obligations, such				
	Creditor'	's Name and	d Address	Dates of payment	Total amount	Amount you still owe	Was this pa	yment for
	<i>Insiders</i> in which you	clude your re are an office	elatives; any general par er, director, person in co	acy, did you make a paym tners; relatives of any gene ntrol, or owner of 20% or m J.S.C. § 101. Include paym	ent on a debt you ov ral partners; partnersh ore of their voting secu	wed anyone who wips of which you are urities; and any man	e a general part laging agent, in	ner; corporations of cluding one for a
	_	List all paym	nents to an insider					
	Insider's	Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
	■ No		lebts guaranteed or cosi nents to an insider	gned by an insider.				
	Insider's	Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment
Dari	4: Ide	ntify Logal /	Actions, Repossessio	ne and Foroclosures	ραια	Still Owe	molade cred	itor s riame
	List all suc and contra		ncluding personal injury	ccy, were you a party in a cases, small claims actions				
	Case title			Nature of the case	Court or agency		Status of th	e case
	Discove	er Bank vs y Pagan	s. Richard	Breach of Contract	Superior Cour California 580 Texas St Fairfield, CA 9		■ Pending □ On appe □ Conclude	
	•		you filed for bankrupt nd fill in the details belo	ccy, was any of your prop w.	erty repossessed, fo	oreclosed, garnish	ed, attached,	seized, or levied?
	☐ Yes.	Fill in the inf	ormation below.					
	Creditor	Name and A	Address	Describe the Property Explain what happene		Date		Value of the property
	accounts No		o make a payment bed	ptcy, did any creditor, inc ause you owed a debt?		ancial institution,	set off any am	ounts from your
	Creditor	Name and A	Address	Describe the action the	ne creditor took	Date taker	action was	Amount

Official Form 107

	Pagan, Richard Anthony & Pa	agan, Nicole Marie	Case number (if known)	
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or		he possession of an assignee for the bene	fit of creditors, a
	☐ Yes			
Pa	art 5: List Certain Gifts and Contributions	s		
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	uptcy, did you give any gifts with a	a total value of more than \$600 per person?	
	Gifts with a total value of more than \$600 person	0 per Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift or cor		ntributions with a total value of more than s	600 to any charity
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	·	ibuted Dates you contributed	Value
Pa	art 6: List Certain Losses			
15.	Within 1 year before you filed for bankrup or gambling?	otcy or since you filed for bankrup	tcy, did you lose anything because of theft	, fire, other disaster,
	■ No			
	Yes. Fill in the details.			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage Include the amount that insurance insurance claims on line 33 of Sche	has paid. List pending	Value of property lost
Pa	art 7: List Certain Payments or Transfers	:		
16.	Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition pre	reparing a bankruptcy petition?		ty to anyone you
	□ No ■ Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of transferred	any property Date payment or transfer was made	Amount of payment
	Bankruptcy Law Group, PC 1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923	Attorney Fee: \$900, \$ be paid post-filing Court Fee: \$335	600 balance will	\$1,235.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that you	itors or to make payments to your		ty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of transferred	any property Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankru	uptcy, did you sell, trade, or other	vise transfer any property to anyone, other	than property

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy
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page 4

	Pagan, Richard Anthony & Pagan	, Nicole Marie		Case numb	er (if known)	
	transferred in the ordinary course of your bus Include both outright transfers and transfers made gifts and transfers that you have already listed on No Yes. Fill in the details.	e as security (such as the		urity interes	t or mortgage on your pro	perty). Do not include
	Person Who Received Transfer Address	Description and va property transferr		paymei	ne any property or nts received or debts exchange	Date transfer was made
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No Yes. Fill in the details.		property to a se	lf-settled t	rust or similar device o	f which you are a
	Name of trust	Description and va	alue of the prope	rty transfe	erred	Date Transfer was made
Par	18: List of Certain Financial Accounts, Instr	ruments, Safe Deposit I	Boxes, and Stora	ge Units		
	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associa No Yes. Fill in the details.	other financial account	s; certificates of			, ,
		Last 4 digits of account number	Type of account instrument		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 ye cash, or other valuables?	ar before you filed for I	oankruptcy, any s	safe depos	sit box or other deposite	ory for securities,
	NoYes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had accommodate Address (Number, Stand ZIP Code)		Describe th	ne contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your I	nome within 1 ye	ar before y	ou filed for bankruptcy	
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St and ZIP Code)		Describe th	ne contents	Do you still have it?
Par	9: Identify Property You Hold or Control for	or Someone Else				
23.	Do you hold or control any property that som someone. No Yes. Fill in the details.	eone else owns? Includ	de any property y	ou borrov	ved from, are storing fo	r, or hold in trust for
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe th	ne property	Value
Par	10: Give Details About Environmental Infor	mation				
_						

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

	Pagan, Richard Anthony & Paga	an, Nicole Marie	Case number (if known)		
•	controlling the cleanup of these substances Site means any location, facility, or property own, operate, or utilize it, including disposa Hazardous material means anything an envi material, pollutant, contaminant, or similar to	s, wastes, or material. y as defined under any environmental la l sites. ironmental law defines as a hazardous w erm.	w, whether you now own, operate, or vaste, hazardous substance, toxic sub		
24.	Has any governmental unit notified you that ■ No □ Yes. Fill in the details.	you may be liable or potentially liable u	nder or in violation of an environmer	ital law?	
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of ■ No □ Yes. Fill in the details.	any release of hazardous material?			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or adn ■ No □ Yes. Fill in the details.	ninistrative proceeding under any enviro	onmental law? Include settlements an	d orders.	
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case	
Par	t 11: Give Details About Your Business or	Connections to Any Business			
27.	_	n a trade, profession, or other activity, e any (LLC) or limited liability partnership ecutive of a corporation	ither full-time or part-time	ousiness?	
	□ No. None of the above applies. Go to P				
	_				
	Pes. Check all that apply above and fill Business Name Address (Number, Street, City, State and ZIP Code)	in the details below for each business. Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN.		
	Richard and Nicole Pagan	Direct Sales - Health Realted items, Household items, etc Affiliated through Amway Debtors attempted this in 2012 but were unable to make it successful. Shortly thereafter, they stopped attempting to sell items. However, they are still active through Amway. No transactions occurring.	Dates business existed EIN: From-To 2012-Current		

DocuSign Envelope ID: E3C947AF-3E9D-4AE7-A17C-7557140FB747

(2886 116-22210322 Filed 053/031/1166 Docc 115

Debtor 2 Pagan, Richard Anthony &	Pagan, Nicole Marie	Case number (if known)	
28. Within 2 years before you filed for bar institutions, creditors, or other parties		tement to anyone about your business? Include all fina	ncial
■ No □ Yes. Fill in the details below.			
Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Part 12: Sign Below			
bankruptcy case can result in fines up to \$ 18 UPS CS 1884 52, 1341, 1519, and 3571.		- · · · · · · · · · · · · · · · · · · ·	
U	65CBA000AEDE4A0		
Richard Anthony Pagan	Nicole Marie Paga	an	
U	65CBA000AEDE4A0	an 2	
Richard Anthony Pagan Signature of Debtor 1 3/31/2016 Date	Nicole Marie Paga Signature of Debtor 3/31/201	an 2	
Richard Antifiony Pagan Signature of Debtor 1 Date Did you attach additional pages to Your Sta	Nicole Marie Paga Signature of Debtor 3/31/201	an 2 5	
Richard Anthony Pagan Signature of Debtor 1 Date Did you attach additional pages to Your Sta	Nicole Marie Paga Signature of Debtor 3/31/201	an 2 5	
Richard Antifiony Pagan Signature of Debtor 1 Date Did you attach additional pages to Your Sta	Nicole Marie Paga Signature of Debtor 3/31/2010 Date atement of Financial Affairs for Indiv	an 2 5 iduals Filing for Bankruptcy (Official Form 107)?	
Richard Antifony Pagan Signature of Debtor 1 Date Did you attach additional pages to Your State No Yes	Nicole Marie Paga Signature of Debtor 3/31/2010 Date atement of Financial Affairs for Indiv	an 2 5 iduals Filing for Bankruptcy (Official Form 107)?	

Fill in this information to identify your case:					
Debtor 1	agan				
Debtor 2 (Spouse, if filing)					
United States Bankruptcy Court for the:		Eastern District of California, Sacramento Division			
Case number					

Check one box only as	directed	in this	form	and	in	Fo	rm
122A-1Supp							

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
- □ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
 - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

			Debt	tor 1	 or 2 or filing spouse
Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and commis	sions (before all	\$	3,739.25	\$ 1,573.38
 Alimony and maintenance payments. Do not include Column B is filled in. 	e payments fro	om a spouse if	\$	0.00	\$ 0.00
4. All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your household roommates. Include regular contributions from a spou Do not include payments you listed on line 3	t. Include regu , your depend	lar contributions ents, parents, and		200.00	\$ 0.00
5. Net income from operating a business, profession,	or farm				
		Debtor 1			
Gross receipts (before all deductions)	\$ 0 .	00			
Ordinary and necessary operating expenses	-\$ 0 .	00			
Net monthly income from a business, profession, or fa	ırm \$ 0.	OO Copy here -	>\$	0.00	\$ 0.00
6. Net income from rental and other real property					
		Debtor 1			
Gross receipts (before all deductions)	\$ 0 .	00			
Ordinary and necessary operating expenses	-\$ 0 .	00			
Net monthly income from rental or other real property	\$ 0 .	OO Copy here -	>\$	0.00	\$ 0.00
7. Interest, dividends, and royalties			\$	0.00	\$ 0.00

Debtor 1 Debtor 2 Pagan, Richard Anthony & Pagan, Nicole Marie

Case number (if known)

				Column Debtor		Column B Debtor 2 c non-filing		
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount re Social Security Act. Instead, list it here:	eceived was a benefit	t under the)				
	For you \$		0.00					
	For your spouse \$		0.00					
	Pension or retirement income. Do not include any amounder the Social Security Act.			\$	0.00	\$	0.00	
10.	Income from all other sources not listed above. Specinot include any benefits received under the Social Securit a victim of a war crime, a crime against humanity, or inter If necessary, list other sources on a separate page and product of the sources of the sou	y Act or payments re national or domestic	eceived as	\$	0.00	\$	0.00	
	· -		-	\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.			\$	0.00	\$	0.00	
						Ψ	¬	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the tot		\$	3,939.25	* -	1,573.38	Total c	5,512.63
							income	•
Part	2: Determine Whether the Means Test Applies to	You						
12.	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	1		с	opy line 11	here=>	\$	5,512.63
	Multiply by 12 (the number of months in a year)						x 1	2
	12b. The result is your annual income for this part of the	form				12	b. \$ 6	66,151.56
13.	Calculate the median family income that applies to y	ou. Follow these step	ps:					
	Fill in the state in which you live.	CA						
	Fill in the number of people in your household.	5]					
	Fill in the median family income for your state and size of	***************************************				13	. \$8	39,840.00
	To find a list of applicable median income amounts, go of form. This list may also be available at the bankruptcy of		specified	in the sepa	arate instruct	tions for this		
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Or Go to Part 3.	n the top of page 1, o	check box	1T,here is i	no presumpti	ion of abuse.		
	14b. Line 12b is more than line 13. On the top o Go to Part 3 and fill out Form 122A-2.	f page 1, check box	2Ţhe pres	umption of	^f abuse is de	termined by F	Form 122A-	2.
Part	3: Sign Below							
	By signing the ender penalty of perjury the	at the information on					and correct	
	x Kichard Pagan	X	M	cole Ma	urie Paga	n		
	Richard Anthony Pagan		Nicole	Maning APG	afg⁄a≀n			
	Signature of Debtor 1	_		e of Debto 2016	or 2			
	Date MM / DD / YYYY	Date) / YYYY				
	If you checked line 14a, do NOT fill out or file Form	n 122A-2.	IVIIVI / DL	, , , , , , ,				
	If you checked line 14b, fill out Form 122A-2 and fi							
	ii you oneokeu iiile 140, iiii out FOIIII 122A-2 and II	io it with this lotti.						

Official Form 122A-1

Fill in this inform	mation to identify your o	ase:		
Debtor 1	Richard Anthony	Pagan		
	First Name	Middle Name	Last Name	
Debtor 2	Nicole Marie Paga			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRI	CT OF CALIFORNIA, SACRAMENTO	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
Stateme	nt of Intentio	n for Indiv	riduals Filing Under Chapt	er 7
Otatomo			Tadalo I IIII g Olidor Oliapi	12/13
16		4a 7	and their farms if	
	ividual filing under chap	• •	out this form it:	
_	e claims secured by you	,		
You must file thi	ever is earlier, unless the	thin 30 days after y	t expired. ou file your bankruptcy petition or by the date set time for cause. You must also send copies to the	
	eople are filing together te the form.	in a joint case, both	are equally responsible for supplying correct info	ormation. Both debtors must sign
Re as complete a	and accurate as nessible	. If more space is r	needed, attach a separate sheet to this form. On th	e ton of any additional name
	our name and case num		needed, attach a separate sheet to this form. On th	e top of any additional pages,
,				
Part 1: List Y	our Creditors Who Have	Secured Claims		
		rt 1 of Schedule D:	Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
information be	elow. editor and the property th	at is collateral	What do you intend to do with the property that	Did you claim the property
	and the property ti		secures a debt?	as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	_
D			☐ Retain the property and enter into a Reaffirmation	Yes
Description of			Agreement.	
property			☐ Retain the property and [explain]:	
securing debt:				<u> </u>

Creditor's ☐ Surrender the property. ☐ No name: ☐ Retain the property and redeem it. ☐ Yes ☐ Retain the property and enter into a *Reaffirmation* Description of Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's ☐ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes \square Retain the property and enter into a *Reaffirmation* Description of Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's ☐ Surrender the property. ☐ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Pagan, Richard Anthon	, 0-,	Case number (if known)	
name:	Retain the proper	ty and redeem it.	
Description of	Retain the property Agreement.	and enter into a Reaffirmation	
property	Retain the property	and [explain]:	
securing debt:			
Part 2: List Your Unexpired Persona	I Property Leases		
or any unexpired personal property le ne information below. Do not list real e	ase that you listed in Schedule G: Executo	ry Contracts and Unexpired Leases (Officia hat are still in effect; the lease period has n it. 11 U.S.C. § 365(p)(2).	l Form 106G), fi ot yet ended. Yo
Describe your unexpired personal pro	perty leases	Will the lease	be assumed?
_essor's name:		□ No	
Description of leased Property:		☐ Yes	
_essor's name:		□ No	
Description of leased Property:		□ Yes	
Lessor's name: Description of leased		□ No	
Property:		☐ Yes	
Lessor's name:		□ No	
Description of leased Property:		☐ Yes	
Lessor's name:		□ No	
Description of leased Property:		☐ Yes	
Lessor's name: Description of leased		□ No	
Property:		☐ Yes	
_essor's name:		□ No	
Description of leased Property:		☐ Yes	
Part 3: Sign Below			
<u> </u>			
roperty that is subject to an unexpired		operty of my estate that secures a debt and	any personal
Richard Pagan	X Ma	ole Marie Pagan	
Richard Anthony Pagan		BA000AFDE4A0 le Marie Pagan	
Signature of Debtor 1		ture of Debtor 2	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California, Sacramento Division

In re	Pagan, Richard Anthony & Pagan, Nicole Marie		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSA	ATION OF ATT	ORNEY FOR I	DEBTOR	
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in	he petition in bankrupto	cy, or agreed to be pa	id to me, for services re	
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have received		\$	1,100.00	
	Balance Due		\$	400.00	
2. 1	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. Т	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	■ I have not agreed to share the above-disclosed compensation firm.	on with any other perso	on unless they are me	mbers and associates o	f my law
I	☐ I have agreed to share the above-disclosed compensation vecopy of the agreement, together with a list of the names of				law firm. A
5. 1	In return for the above-disclosed fee, I have agreed to render l	egal service for all aspe	ects of the bankruptcy	case, including:	
b c	a. Analysis of the debtor's financial situation, and rendering a preparation and filing of any petition, schedules, statement Representation of the debtor at the meeting of creditors and [Other provisions as needed] Balane will be paid post-filing	of affairs and plan whi	ich may be required;	-	cruptcy;
6. E	By agreement with the debtor(s), the above-disclosed fee does Motion work and representation in an advers		ing service:		
		RTIFICATION			
	I certify that the foregoing is a complete statement of any agre- ankruptcy proceeding.	ement or arrangement f		representation of the o	debtor(s) in
	3/31/2016	Paul Bain			
De	ate	Pauldeep Buins Signature of Attorr Bankruptcy Law	пеу		
		1851 Heritage L Sacramento, CA (707) 422-8500 paulb@bankrup Name of law firm	\ 95815-4923 Fax: (888) 843-720	30	

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	Part 1: Identify Yourself							
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):				
1.	Your full name							
	Write the name that is on	James		Donna				
	your government-issued picture identification (for	First name		First name				
	example, your driver's	Christopher		Jeanne				
	license or passport).	Middle name	_	Middle name				
	Bring your picture	Dean		Dean				
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)				
2.	All other names you have used in the last 8 years Include your married or maiden names.	James C Dean James Dean		Donna Dean Donna J Dean				
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2816		xxx-xx-7952				

Debtor 1 Debtor 2

Dean, James Christopher & Dean, Donna Jeanne

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s)		
5. Where you live		75 Calle Chapala	If Debtor 2 lives at a different address:		
		Vacaville, CA 95687-6518 Number, Street, City, State & ZIP Code Solano County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code		
6. Why you are choosing this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) My residence and principal assets have been located in this District.		

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Debtor 2 Dean, James Christopher & Dean, Donna Jeanne				Donna Jeanne	Case number (if known)				
Par	t 2: Tell the Court About \	∕our Bankrı	ıptcy Ca	ase					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chapter 7							
		☐ Chapte	er 11						
		☐ Chapte	er 12						
		☐ Chapte	er 13						
8.	8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the cler about how you may pay. Typically, if you are paying the fee yourself, you may If your attorney is submitting your payment on your behalf, your attorney may pre-printed address.					ourself, you may pay with cash, cashier's check, or money of			
				y the fee in installments. If you of Installments (Official Form 103A).	choose this op	otion, sign and attach the Application for Individuals to Pay	Гһе		
I request that my fee be waived (You may request this option only if you are filing for Cha not required to, waive your fee, and may do so only if your income is less than 150% of the control your family size and you are unable to pay the fee in installments). If you choose this option,						ion only if you are filing for Chapter 7. By law, a judge may,	but is		
						come is less than 150% of the official poverty line that applie	es to		
				Chapter 7 Filing Fee Waived (Office			liori		
9.	Have you filed for	■ No.							
	bankruptcy within the last 8 years?	☐ Yes.							
			District	\	Vhen	Case number			
			District		Vhen	Case number			
			District		Vhen	Case number			
10.	Are any bankruptcy cases	■ No							
	pending or being filed by a spouse who is not filing	☐ Yes.							
	this case with you, or by a business partner, or by an affiliate?								
			Debtor			Relationship to you			
			District		Vhen	Case number, if known			
			Debtor			Relationship to you			
			District		Vhen	Case number, if known			
11.	Do you rent your	■ No.	Go to	line 12.					
	residence?	☐ Yes.	Has yo	our landlord obtained an eviction ju	dgment again:	st you and do you want to stay in your residence?			
				No. Go to line 12.	-				
				Yes. Fill out <i>Initial Statement Ab</i> bankruptcy petition.	out an Evictior	n Judgment Against You (Form 101A) and file it with this			

needed, why is it needed?

Where is the property?

Debtor 1 Dean, James Christopher & Dean, Donna Jeanne Case number (if known) Debtor 2 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as an Name of business, if any individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 you a small business U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is alleged to pose a threat of Yes. imminent and identifiable What is the hazard? hazard to public health or safety? Or do you own If immediate attention is any property that needs

EXHIBIT 4

Number, Street, City, State & Zip Code

immediate attention?
For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Debtor 1 Debtor 2

Dean, James Christopher & Dean, Donna Jeanne

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

DocuSign Envelope ID: 6926FCFD-9208-4E7C-95B4 Hiter) (0331/1166 Debtor 1 Dean, James Christopher & Dean, Donna Jeanne Case number (if known) Debtor 2 Part 6: **Answer These Questions for Reporting Purposes** What kind of debts do 16. 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Do you estimate that after Yes. any exempt property is paid that funds will be available to distribute to unsecured creditors? excluded and administrative expenses ■ No are paid that funds will be available for distribution ☐ Yes to unsecured creditors? 18. How many Creditors do **1.000-5.000 1** 25.001-50.000 1-49 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0.001-25.000 ☐ More than 100.000 **1**00-199 **200-999** 19. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities to **\$50,001 - \$100,000** □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United

States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

—Docusigned by: I understand making a false statement, concealing property, or obtain թարթարար property by fraud in connection with a bankruptcy cannotes resultantines up to \$250,000, or imprisonment for up to 20 years of both 18 U.S.C. §§ 152, 1341, 1519, and 3571.

James Christopher Dean Signature of Debtor 1

3/31/2016 Executed on

MM / DD / YYYY

Domma Jeanne Dean Signature of Debtor 2

3/31/2016 Executed on

MM / DD / YYYY

page 6

DocuSign Envelope ID: 6926FCFD-9208-4E7C-95B4-F9502A4FA757

Debtor 1 Debtor 2 Dean, James Ch	ristopher & Dean, Donna Jeanne	Cas	e number (if known)				
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition of the control of the debtor(s) that I have no knowledge after an inquiry that the information in the schedules filed with the petition of the control of the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition of the debtor(s) and have explained the relief available under each chapter for which the person is eligible. I also certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition of the debtor(s) and the relief available under each chapter for which the person is eligible. I also certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition of the peti						
	Pauldeep Bains Printed name						
	Bankruptcy Law Group, PC Firm name						
	1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923 Number. Street. City. State & ZIP Code						
	Contact phone (707) 422-8500	Email address	paulb@bankruptcylg.com				
	268004						
	Bar number & State						

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Certificate Number: 17572-CAC-CC-027208530



CERTIFICATE OF COUNSELING

I CERTIFY that on March 31, 2016, at 1:39 o'clock PM PDT, James Christopher Dean received from Dollar Learning Foundation, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Central District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 31, 2016 By: /s/Selin Polat

Name: Selin Polat

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 17572-CAC-CC-027208915



CERTIFICATE OF COUNSELING

I CERTIFY that on March 31, 2016, at 2:32 o'clock PM PDT, Donna Dean received from Dollar Learning Foundation, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Central District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 31, 2016 By: /s/Arman Polat

Name: Arman Polat

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill in this infor	mation to identify your	case:		
Debtor 1	James Christoph	ner Dean		
	First Name	Middle Name	Last Name)
Debtor 2	Donna Jeanne D	ean		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMEN	NTO
Case number (if known)				☐ Check if this is
,				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	assets
			of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	3,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	74,936.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	77,936.00
aı	rt 2: Summarize Your Liabilities		
			liabilities nt you owe
	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	82,299.00
	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	29,452.00
	Your total liabilities	\$	111,751.00
'aı	rt 3: Summarize Your Income and Expenses		
	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	3,906.7
•	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,431.00
aı	rt 4: Answer These Questions for Administrative and Statistical Records		
	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your ot	her schedi	ules.

- Yes7. What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debt	_	ean, James Christopher & Dean, Donna		
Debt	or 2 _ J (eanne Case number (if known)		
	_	ur debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this bourt with your other schedules.	x and subi	mit this form to the
8.		e Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	\$	4,411.29

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this	information to identify you	ır case and this	s filing:			
Debtor 1	James Christon					
Debtor 2	First Name	Middle	Name	Last Name	1	
(Spouse, if filin	Donna Jeanne First Name	Middle	Name	Last Name		
United Stat	es Bankruptcy Court for the:	: EASTERN [DISTRIC	CT OF CALIFORNIA, SACRAMENTO DIV	/ISION_	
Case numb	per					☐ Check if this is an
						amended filing
Scheon sates of think it fits be information.	est. Be as complete and accu If more space is needed, attac	ribe items. List au	. If two m	only once. If an asset fits in more than one narried people are filing together, both are ess form. On the top of any additional pages,	qually responsible for s	upplying correct
Answer ever	•					
Part 1: Des	scribe Each Residence, Buildi	ng, Land, or Oth	ier Real E	Estate You Own or Have an Interest In		
1. Do you ov	vn or have any legal or equital	ble interest in an	ny resider	nce, building, land, or similar property?		
□ No. Go	, , ,	ble interest in an	ny resider	nce, building, land, or similar property?		
□ No. Go	to Part 2.	ble interest in an		nce, building, land, or similar property? is the property? Check all that apply		
No. Go ■ Yes. W	to Part 2. Where is the property?		What i			claims or exemptions. Put
No. Go ■ Yes. W	to Part 2.		What i	is the property? Check all that apply	the amount of any secu	claims or exemptions. Put red claims on Schedule D: nims Secured by Property.
No. Go ■ Yes. W	to Part 2. Where is the property?		What i	is the property? Check all that apply Single-family home Duplex or multi-unit building	the amount of any secu Creditors Who Have Cla	red claims on Schedule D: aims Secured by Property.
No. Go ■ Yes. W	to Part 2. Where is the property?	ion	What i	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secu Creditors Who Have Cla Current value of the entire property?	red claims on Schedule D: nims Secured by Property. Current value of the portion you own?
No. Go ■ Yes. W	to Part 2. Where is the property?		What i	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount of any secu Creditors Who Have Cla	red claims on Schedule D: aims Secured by Property. Current value of the
No. Go ■ Yes. W	to Part 2. Where is the property? ddress, if available, or other descripti	ion	What i	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	Current value of the entire property? \$3,000.00 Describe the nature of	red claims on Schedule D: nims Secured by Property. Current value of the portion you own?
No. Go ■ Yes. W	to Part 2. Where is the property? ddress, if available, or other descripti	ion	What i	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$3,000.00 Describe the nature of	Current value of the portion you own? \$3,000.00 Your ownership interest enancy by the entireties, or
No. Go Yes. W	to Part 2. Where is the property? ddress, if available, or other descripti	ion	What i	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other as an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$3,000.00 Describe the nature of (such as fee simple, to a life estate), if known	Current value of the portion you own? \$3,000.00 Your ownership interest nancy by the entireties, or
No. Go ■ Yes. W	to Part 2. Where is the property? ddress, if available, or other descripti	ion	What i	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only	Current value of the entire property? \$3,000.00 Describe the nature of (such as fee simple, to a life estate), if known	Current value of the portion you own? \$3,000.00 Your ownership interest enancy by the entireties, or
No. Go Yes. W	to Part 2. Where is the property? ddress, if available, or other descripti	ion	What i	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current value of the entire property? \$3,000.00 Describe the nature of (such as fee simple, to a life estate), if known Check if this is co (see instructions)	Current value of the portion you own? \$3,000.00 Your ownership interest nancy by the entireties, or

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

you have attached for Part 1. Write that number here.....=>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$3,000.00

Debte	Doon James Christopher 9	Dean, Donna Jeanne Ca	ase number <i>(if known)</i>	
3. Ca	rs, vans, trucks, tractors, sport utility v	ehicles, motorcycles		
	No			
	Yes			
	. 65			
3.1	Make: Ford	Who has an interest in the property? Check one		d claims or exemptions. Put
	Model: Focus	☐ Debtor 1 only		cured claims on Schedule D: Claims Secured by Property.
	Year: 2014	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 20000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	☐ At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$9,658.00	9,658.00
	Malian Dodgo	Who has an interest in the mannet 2 of	Do not deduct secure	d claims or exemptions. Put
3.2	Make: Dodge Model: Caliber	Who has an interest in the property? Check one	the amount of any sec	cured claims on Schedule D:
	Model: Caliber Year: 2007	Debtor 1 only	Creditors who have t	Claims Secured by Property.
	400000	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 109000 Other information:	 ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another 	entire property?	portion you own?
	Other information.	At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$2,541.00	92,541.00
4.1	Make: Fleetwood	Who has an interest in the property? Check one	the amount of any sec	d claims or exemptions. Put cured claims on Schedule D:
	Model: Expression	Debtor 1 only	Creditors Who Have 0	Claims Secured by Property.
	Year: 2008	Debtor 2 only	Current value of the	Current value of the
	Oth or information.	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information: Mobile Home (Residence)	At least one of the debtors and another	\$53.000.00	\$53,000.00
	15 x 56	☐ Check if this is community property (see instructions)		
		wn for all of your entries from Part 2, including any umber here		\$65,199.00
Part 8	Describe Your Personal and Household ou own or have any legal or equitable in			Current value of the portion you own? Do not deduct secured
E)	usehold goods and furnishings kamples: Major appliances, furniture, linens No	, china, kitchenware		claims or exemptions.
	Yes. Describe Household Go	pods		\$2,000.00
	including cell phones, cameras, No Yes. Describe	, , , ,	scanners; music collection	
Officia	al Form 106A/B	Schedule A/B: Property		page

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	btor 1 btor 2	Dean, Jame	s Christopher & Dean, Donna Jeanne Case no	umber (if known)	
			Electronics		\$600.00
	Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; nemorabilia, collectibles	stamp, coin, or t	paseball card collections; other
	Example No	ent for sports ares: Sports, photoginstruments Describe	nd hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, s	kis; canoes and l	kayaks; carpentry tools; musical
	□ No ·		s, shotguns, ammunition, and related equipment		
	— 163.	Describe	.22 Rifle (Marlin)		\$75.00
	□ No É		othes, furs, leather coats, designer wear, shoes, accessories		
			Clothes		\$3,000.00
13.	■ No □ Yes. Non-far Examp			nes, gems, gold,	silver \$100.00
			3 Cats		\$100.00
	■ No	ner personal and	d household items you did not already list, including any health aids you ormation	did not list	
15			of all of your entries from Part 3, including any entries for pages you have nber here	attached for	\$5,775.00
		cribe Your Finan			
Do	you ow	n or have any l	egal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No		ave in your wallet, in your home, in a safe deposit box, and on hand when you file	e your petition	
	- res		Cas	sh on Hand	\$27.00

	ebtor 1 ebtor 2 Dean, James Chris	stopher & Dean, Donna	a Jeanne Case number (if known)	
	institutions. If you h		ertificates of deposit; shares in credit unions, brokerage houses, and othe same institution, list each.	ner similar
	□ No ■ Yes		Institution name:	
	17.1	. Checking Account	Travis Credit Union 818(00)	\$6.00
	17.2	. Savings Account	Travis Credit Union 818(06) Christmas Acct	\$6.00
	17.3	3. Checking Account	Travis Credit Union 818(50)	\$10.00
	17.4	. Checking Account	Travis Credit Union 260(00)	\$1,800.00
	17.5	5. Savings Account	Travis Credit Union 000	\$1,018.00
20.	joint venture No No Yes. Give specific information N Government and corporate be Negotiable instruments include Non-negotiable instruments are No Yes. Give specific information	Institution or issuer name d interests in incorporated n about them lame of entity: onds and other negotiable personal checks, cashiers' of those you cannot transfer to		partnership, and
	Retirement or pension accour Examples: Interests in IRA, ER ■ No □ Yes. List each account separa	nts IISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other pension or profit-sharing plans Institution name:	
22.	Security deposits and prepays Your share of all unused deposi	ments its you have made so that yo	u may continue service or use from a company utilities (electric, gas, water), telecommunications companies, or others	
23.	Annuities (A contract for a period	odic payment of money to you	u, either for life or for a number of years)	
	■ No □ Yes Issuer na	me and description.		
24.	26 U.S.C. §§ 530(b)(1), 529A(b)		d ABLE program, or under a qualified state tuition program.	
	■ No □ Yes Institution	n name and description. Sepa	arately file the records of any interests.11 U.S.C. § 521(c):	

☐ Yes. Describe each claim.......

Deb Deb	Doon James Christenhau 9 Doon Donne Jose	ne	Case number (if known)	
34. (Other contingent and unliquidated claims of every nature, inclu	ding counterclaims of	the debtor and rights to set	off claims
	No Yes. Describe each claim			
	ny financial assets you did not already list			
	No I Yes. Give specific information			
_	Tes. Give specific information		_	
36.	Add the dollar value of all of your entries from Part 4, includin Part 4. Write that number here			\$3,962.00
Part	5: Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	te in Part 1.	
37. D	o you own or have any legal or equitable interest in any business-relat	ted property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	t In.	
46 [o you own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
	No. Go to Part 7.	or commercial norming	rolated property :	
	☐ Yes. Go to line 47.			
Part	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
_	To you have other property of any kind you did not already list Examples: Season tickets, country club membership	?		
_	No I Yes. Give specific information			
			Г	
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	List the Totals of Each Part of this Form			_
55.	Part 1: Total real estate, line 2			\$3,000.00
57.	Part 3: Total personal and household items, line 15	\$65,199.00 \$5,775.00		
58.	Part 4: Total financial assets, line 36	\$3,962.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$74,936.00	Copy personal property tota	\$74,936.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$77,936.00

Vehicle Appraisal

Page 1 of 1



DATE: 3/30/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

VEHICLE INFORMATION:

YEAR: 2014 CONDITION: Average

MAKE: Ford MILEAGE: 20000

MODEL: Focus ZIP CODE: 95687

STYLE: SE 4dr Hatchback (2.0L 4cyl

5M)

OPTIONS:

RETAIL

TRADE IN

PRIVATE PARTY

Edmunds.com TMV® \$10,775.00

\$8,324.00

\$9,658.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any options. (If no Zip Code was provided, this price is the national price.)

DATA PROVIDED BY



Vehicle Appraisal

Page 1 of 1



DATE: 3/30/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

VEHICLE INFORMATION:

YEAR: 2007 CONDITION: Average

MAKE: Dodge MILEAGE: 109000

MODEL: Caliber ZIP CODE: 95687

STYLE: SXT 4dr Wagon (1.8L 4cyl 5M)

OPTIONS:

RETAIL

TRADE IN

PRIVATE PARTY

Edmunds.com TMV®

\$3,562.00

\$1,810.00

\$2,541.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any options. (If no Zip Code was provided, this price is the national price.)

DATA PROVIDED BY



-	I in this inform	nation to identify your o	2350.			
De	ebtor 1	James Christoph First Name	er Dean Middle Name	ı	_ast Name	
De	ebtor 2					
	ouse if, filing)	First Name	Middle Name	L	ast Name	
Ur	nited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF CA	ALIFO	RNIA, SACRAMENTO	
Ca	ase number					
	known)					Check if this is an amended filing
0	fficial Fo	rm 106C				
S	chedule	e C: The Pro	pperty You Cla	im	as Exempt	12/1
pro out	perty you listed	on Schedule A/B: Prope	rty (Official Form 106A/B) as yo	ur sou	urce, list the property that you claim a	oplying correct information. Using the s exempt. If more space is needed, fill s, write your name and case number (if
spe app fun to a	ecific dollar am olicable statuto ds—may be u	nount as exempt. Altern ory limit. Some exempti nlimited in dollar amou llar amount and the val	atively, you may claim the fu ons—such as those for healt nt. However, if you claim an e	ıll fair th aid: exem _l	s, rights to receive certain benefit	ng exempted up to the amount of any s, and tax-exempt retirement under a law that limits the exemption
Pa	rt 1: Identif	y the Property You Cla	im as Exempt			
1	Which set of	exemptions are you cla	aiming? Check one only, even	if you	ır snouse is filina with you	
•	_			•	,	
	■ You are cla	ilming state and federal n	onbankruptcy exemptions. 11	U.S.C	. § 522(b)(3)	
	☐ You are cla	iming federal exemptions	i. 11 U.S.C. § 522(b)(2)			
2.	For any prop	erty you list on Schedu	ule A/B that you claim as exer	mpt, f	ill in the information below.	
		on of the property and line that lists this property	on Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
D	ebtor 1 Exem	nntions	Goriedale A/D			
<u>D(</u>		redule A/B: 1.1			\$3,000.00	CCCP § 703.140(b)(5)
	Line nom Sch	edule A/D. 1.1			100% of fair market value, up to any applicable statutory limit	
	Ford		\$9,658.00	•	\$0.00	CCCP § 703.140(b)(2)
	Focus 2014				100% of fair market value, up to	
	20000				any applicable statutory limit	
	Line from Sch	edule A/B: 3.1				
	Ford		\$9,658.00	_	\$0.00	CCCP § 703.140(b)(5)
	Focus		Ψυ,υυι.υυ	_	<u> </u>	
	2014 20000				100% of fair market value, up to any applicable statutory limit	
		edule A/B: 3.1			any apphoasio statutory mint	
	Ford		\$9,658.00		\$0.00	CCCP § 703.140(b)(5)
	Focus			_		

Official Form 106C

2014

20000

Line from Schedule A/B: 3.1

100% of fair market value, up to any applicable statutory limit

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	unt of the exemption you claim	Specific laws that allow exemptio
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
Dodge Caliber 2007 109000 Line from Schedule A/B: 3.2	\$2,541.00	■ .	\$0.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(5)
Fleetwood Expression 2008 Line from Schedule A/B 4.1	\$53,000.00	■ .	\$2,117.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(5)
Household Goods Line from Schedule A/B: 6.1	\$2,000.00	■ .	\$2,000.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(3)
Electronics Line from Schedule A/B. 7.1	\$600.00	■ .	\$600.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(5)
.22 Rifle (Marlin) Line from Schedule A/B: 10.1	\$75.00		\$75.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(3)
Clothes Line from Schedule A/B: 11.1	\$3,000.00	■ .	\$3,000.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(3)
3 Cats Line from Schedule A/B: 13.1	\$100.00	•	\$100.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(3)
Cash on Hand Line from Schedule A/B: 16.1	\$27.00	.	\$27.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(5)
Travis Credit Union 818(00) Line from Schedule A/B: 17.1	\$6.00		\$6.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(5)
Travis Credit Union 818(06) Christmas Acct Line from Schedule A/B: 17.2	\$6.00	•	\$6.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(5)
Travis Credit Union 818(50) Line from Schedule A/B: 17.3	\$10.00	.	\$10.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(5)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Travis Credit Union 260(00)	\$1,800.00		\$450.00	CCCP § 703.140(b)(5)
Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
Travis Credit Union 260(00) Line from Schedule A/B 17.4	\$1,800.00		\$1,350.00	CCCP § 703.140(b)(5)
Line IIoiii Schedule A/B. 17.4			100% of fair market value, up to any applicable statutory limit	
Travis Credit Union 000 Line from Schedule A/B 17.5	\$1,018.00		\$1,018.00	CCCP § 703.140(b)(5)
Line nom Schedule A/L 17.			100% of fair market value, up to any applicable statutory limit	
Whole Life Policy through AAA Policy975	\$1,095.00		\$1,095.00	CCCP § 703.140(b)(8)
\$15,000 Death Benefit Policy purchased in January 2011 Cash Value after 5 years is \$1,095 Line from Schedule A/B 31.1			100% of fair market value, up to any applicable statutory limit	
 Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 No 			on or after the date of adjustment.)	
Yes. Did you acquire the property covered No Yes	by the exemption within	า 1,21	5 days before you filed this case?	

							_	
Fill	l in th	is infor	mation to identify your case	9:				
De	btor 1							
			First Name	Middle Name		Last Name	}	
	btor 2 ouse if,		Donna Jeanne Dean First Name	Middle Name		Last Name		
(0)	.,	9/						
Un	ited S	States B		ASTERN DISTRICT OF CAUVISION	ALIFO	DRNIA, SACRAMENTO		
Ca	se nu	mber						
(if k	nown)							Check if this is an amended filing
Of	fici	al Fo	orm 106C					
So	che	edul	e C: The Prop	erty You Cla	im	as Exempt		12/15
propout a	erty y	ou liste	d on <i>Schedule A/B: Property</i> (Official Form 106A/B) as yo	ur so	r, both are equally responsible for sup urce, list the property that you claim as ary. On the top of any additional pages	exempt. If	more space is needed, fill
to a app	parti	icular d le statu		of the property is determin		ption of 100% of fair market value uo exceed that amount, your exemp		
1.	Whi	ch set c	of exemptions are you claim	ing? Check one only, even	if you	ır spouse is filing with you.		
	■ Y	ou are c	laiming state and federal nonb	ankruptcy exemptions. 11 l	U.S.C	C. § 522(b)(3)		
	□ Y	ou are c	laiming federal exemptions.	I1 U.S.C. § 522(b)(2)				
2.	For	any pro	perty you list on Schedule	A/B that you claim as exer	npt, 1	fill in the information below.		
			tion of the property and line on ∃ that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific la	aws that allow exemption
				Copy the value from Schedule A/B	Ch	eck only one box for each exemption.		
De	btor	2 Exe	mptions					
		descrip	otion Chedule A/B:					
	LITIC	110111 00	incadic A/D.			100% of fair market value, up to any applicable statutory limit		
3.			iming a homestead exempti			de constitue de la constitue d		
	(Sub	•	lajustment on 4/01/16 and eve	ry 3 years arter that for case	s tileo	d on or after the date of adjustment.)		
		No	Character (I	and built and the second second	. 4 0	IF down by Common (P. 141)		
	Ц	_	, , , , ,	erea by the exemption withir	า 1,21	5 days before you filed this case?		
		_	No Voc					
			Yes					

Fill in this inform	nation to identify you	r case:			
Debtor 1	James Christop				
Debtor 2	First Name	Middle Name Last Name			
(Spouse if, filing)	Donna Jeanne l				
		EASTERN DISTRICT OF SALIFORNIA SA	ODAMENTO		
United States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF CALIFORNIA, SA DIVISION	ACRAMENTO		
Case number					
(if known)				_	if this is an
				amend	led filing
Official Form	n 106D				
		Who Have Claims Secure	ed by Propert	У	12/15
Be as complete and	accurate as possible. I	f two married people are filing together, both are e	qually responsible for sur	oplying correct informati	on. If more space is
needed, copy the Ad		t, number the entries, and attach it to this form. On			
known).	h h				
	have claims secured by		. It was a sufficient about a second	and an distriction	
		is form to the court with your other schedules. Yo	u have nothing else to re	port on this form.	
Yes. Fill in	all of the information be	elow.			
Part 1: List All	l Secured Claims				
2. List all secured of	claims. If a creditor has n	nore than one secured claim, list the creditor separatel	Column A	Column B	Column C
		a particular claim, list the other creditors in Part 2. As cal order according to the creditor 's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
much as possible, is	st the cialins in alphabetic	cal order according to the creditor smalle.	value of collateral.	claim	If any
2.1 Travis Fcu		Describe the property that secures the claim:	\$4,825.00	\$2,541.00	\$2,284.00
Creditor's Name	•	2007 Dodge Caliber			
DO Bay 20	000	As of the date you file, the claim is: Check all that			
PO Box 20	CA 95696-2069	apply.			
	City, State & Zip Code	☐ Contingent ☐ Unliquidated			
rumber, oneet,	Oity, State & Zip Oode	☐ Disputed			
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		■ An agreement you made (such as mortgage or so	ecured		
Debtor 2 only		car loan)	334.34		
■ Debtor 1 and De	btor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	ne debtors and another	☐ Judgment lien from a lawsuit			
Check if this cla	aim relates to a	Other (including a right to offset)			
community del	bt				
Date debt was incu	ırred	Last 4 digits of account number 6001			
	<u> </u>				
1//1	deral Credit		¢26 504 00	¢0.659.00	¢46 022 00
Union Creditor's Name		Describe the property that secures the claim:	\$26,591.00	\$9,658.00	\$16,933.00
Creditor 3 Name	•	2014 Ford Focus			
PO Box 20	069	As of the date you file, the claim is: Check all that apply.			
	CA 95696-2069	Contingent			
Number, Street,	City, State & Zip Code	Unliquidated			
		☐ Disputed			
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		An agreement you made (such as mortgage or so	ecured		
Debtor 2 only		car loan)			
Debtor 1 and De		☐ Statutory lien (such as tax lien, mechanic's lien)			
_	ne debtors and another	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)			
Check if this cla community del		Unier (including a right to onset)			

Official Form 106D

Debtor 1 James Christopher Dea		Ca	se number (if know)		
Debtor 2 Donna Jeanne Dean	anie Last Name				
First Name Middle N	ame Last Name				
Date debt was incurred	Last 4 digits of account number	6002			
2.3 Vanderbilt Mortgage	Describe the property that secures the clair	n:	\$50,883.00	\$53,000.00	\$0.00
Creditor's Name	2008 Fleetwood Expression Mobile Home (Residence) 15 x 56	;			
Attn: Bankruptcy Dept PO Box 9800 Maryville, TN 37802-9800	As of the date you file, the claim is: Check al apply. Contingent	I that			
Number, Street, City, State & Zip Code	☐ Unliquidated				
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgag	e or secure	d		
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number	8284			
Add the dollar value of your entries in Col	umn A on this page. Write that number here:		\$82,299.00	1	
If this is the last page of your form, add th	. •			1	
Write that number here:	, , , , , , , , , , , , , , , , , , ,		\$82,299.00	_	
	r a Debt That You Already Listed				
trying to collect from you for a debt you o	e notified about your bankruptcy for a debt the we to someone else, list the creditor in Part 1 you listed in Part 1, list the additional credito is page.	, and then	list the collection agency	y here. Similarly, if you h	ave more
Name, Number, Street, City, State & Travis Credit Union	Zip Code	On which li	ne in Part 1 did you enter	the creditor? _2.2_	
PO Box 2069 Vacaville, CA 95696-2069		Last 4 digits	s of account number 60	02	
Name, Number, Street, City, State & Travis Credit Union PO Box 2069 Vacaville, CA 95696-2069	Zip Code		ne in Part 1 did you enter s of account number 60		
Name, Number, Street, City, State & Vanderbilt Mortgage 500 Alcoa Trl Maryville, TN 37804-5516	Zip Code		ne in Part 1 did you enter s of account number <u>82</u>		
			·	·	-

Fill in th	nis information to	identify your c	ase:						
Debtor 1	l Jam	es Christoph	er Dean						
	First N		Middle N	lame	Last Name		 }		
Debtor 2		na Jeanne De							
(Spouse if,	, filing) First N	lame	Middle N	ame	Last Name				
United S	States Bankruptcy	Court for the:	EASTERN I	DISTRICT OF C	CALIFORNIA, SA	ACRAMENTO			
Case nu	ımber								
(if known)				_					Check if this is an
									amended filing
Officia	al Form 106	E/E							
	dule E/F: C		ho Hava	Hacocura	nd Claims				12/15
									ms. List the other party to
the Contir	nuation Page to thi ber (if known). —		ve no information	on to report in a					e boxes on the left. Attach s, write your name and
	iny creditors have								
_	lo. Go to Part 2.	,							
_ N									
Part 2:	_	r NONPRIORITY	/ Uncocured	Claime					
unse	all of your nonprio	creditor separately	for each claim.	For each claim lis	sted, identify what	type of claim it i	is. Do not list claim	s already ind	an one nonpriority cluded in Part 1. If more Continuation Page of Part
2.		,		,			,		ŭ
									Total claim
	Bank of Ameri			Last 4 digits of	account number	8419			\$5,553.00
	Nonpriority Creditor NC4-105-03-14			When was the d	lebt incurred?				
	PO Box 26012					-			<u> </u>
_	Greensboro, N		2						
	Number Street City	•		As of the date y	ou file, the claim	is: Check all th	at apply		
	Who incurred the o	debt? Check one.		_					
	-			Contingent					
	Debtor 2 only			☐ Unliquidated☐ Disputed☐					
	Debtor 1 and De								
	At least one of the			Type of NONPR ☐ Student loans	NORITY unsecure	ea ciaim:			
	☐ Check if this cl	aim is for a comn	nunity	_	-	orotion	ant or diverse the f	ا ا - الماريمين	
	ls the claim subject	t to offset?		report as priority		aration agreem	ent or divorce that	you ala not	
	■ No			Debts to pens	sion or profit-shari	ng plans, and o	ther similar debts		
	☐ Yes			Other. Specif	57				
	_ 100			Other, Specif					_

Debto	Dean, James Christopher & Dean	i, Donna Jeanne	Case number (f know)							
4.2	Citi	Last 4 digits of account number	0425	\$1,022.00						
	Nonpriority Creditor's Name	When was the debt incurred?								
	701 E 60th St N Sioux Falls, SD 57104-0432 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply							
	Debtor 1 only	☐ Contingent								
	Debtor 2 only	☐ Unliquidated								
	☐ Debtor 1 and Debtor 2 only	☐ Disputed								
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:							
	☐ Check if this claim is for a community	Student loans								
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not							
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts							
	Yes	Other. Specify								
4.3	Cr Bur USA Nonpriority Creditor's Name	Last 4 digits of account number	5148	\$179.00						
	• •	When was the debt incurred?								
	757 L St									
	Fresno, CA 93721-2904 Number Street City State Zlp Code	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply							
	Who incurred the debt? Check one.	• ,	,							
	Debtor 1 only	☐ Contingent								
	Debtor 2 only	☐ Unliquidated								
	☐ Debtor 1 and Debtor 2 only	☐ Disputed								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured								
	☐ Check if this claim is for a community	☐ Student loans								
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims								
	No	☐ Debts to pension or profit-sharing plans, and other similar debts								
	Yes	_								
	Li Tes	Other. Specify								
4.4	Synchrony Bank/Sams Club Nonpriority Creditor's Name	Last 4 digits of account number	9834	\$7,903.00						
	Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104	When was the debt incurred?								
	Number Street City State ZIp Code	As of the date you file, the claim in the	s: Check all that apply							
	Who incurred the debt? Check one.									
	Debtor 1 only	☐ Contingent								
	Debtor 2 only	☐ Unliquidated								
	Debtor 1 and Debtor 2 only									
	\square At least one of the debtors and another	<u></u>	Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community	☐ Student loans								
	debt Is the claim subject to offset?	 Obligations arising out of a sepa report as priority claims 								
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts							
	Yes	Other. Specify								

	Travis Credit Union Nonpriority Creditor's Name		Last 4 digits of account number	7335	<u>\$14,795.</u>						
			When was the debt incurred?								
		City State ZIp Code the debt? Check one.	As of the date you file, the clain	n is: Checl	k all that apply						
■ D	ebtor 1 onl	ly	☐ Contingent								
□ D	ebtor 2 onl	l y	_	☐ Unliquidated							
_		d Debtor 2 only	☐ Disputed								
		of the debtors and another	Type of NONPRIORITY unsecur	ed claim:							
		s claim is for a community	☐ Student loans								
debt Is the claim subject to offset?			☐ Obligations arising out of a sepreport as priority claims	☐ Obligations arising out of a separation agreement or divorce that you did not							
■ N	lo		Debts to pension or profit-shar	ing plans,	and other similar debts						
□ Y	es		Other. Specify								
			bt That You Already Listed	vou alroa	dy listed in Parts 1 or 2. For example, if a collection agenc						
is trying to o	collect fro than one c	m you for a debt you owe to s	omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	n Parts 1	or 2, then list the collection agency here. Similarly, if you editors here. If you do not have additional persons to be						
Name and Add	dress		On which entry in Part 1 or Part 2 did yo	ou list the c	original creditor?						
Bk of Ame	•		Line 4.1 of (Check one):	☐ Part 1:	Creditors with Priority Unsecured Claims						
PO Box 98 El Paso, T		2228		Part 2:	Creditors with Nonpriority Unsecured Claims						
El Paso, I	A 19990	-2230	Last 4 digits of account number	8	419						
Name and Add		DC.	On which entry in Part 1 or Part 2 did yo		<u> </u>						
Syncb/San PO Box 96		DC			Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Claims						
Orlando, F	L 32896	6-5005		- Part 2. Creditors with Nonphority Onsecured Claims							
			Last 4 digits of account number	9	834						
Part 4: Ad	dd the Ar	mounts for Each Type of U	nsecured Claim								
6. Total the an type of unse			aims. This information is for statistical	reporting	purposes only. 28 U.S.C. §159. Add the amounts for each						
					Total Claim						
	6a.	Domestic support obligation	ıs	6a.	\$ 0.00						
Total claims				01							
from Part 1	6b.	Taxes and certain other deb	ts you owe the government I injury while you were intoxicated	6b.	\$0.00						
	6c.	Ciaims for death or persona		6c.	\$ 0.00						
	6d	Other Add all other priority un	• •	6d							
	6d.	Other. Add all other priority un	secured claims. Write that amount here.	6d.	\$ 0.00						
	6d. 6e.	Other. Add all other priority un Total Priority. Add lines 6a th	secured claims. Write that amount here.	6d. 6e.							
			secured claims. Write that amount here.		\$ 0.00 \$ 0.00						
Total claims			secured claims. Write that amount here.		\$ 0.00						
Total claims from Part 2	6e.	Total Priority. Add lines 6a th Student loans Obligations arising out of a	rough 6d. separation agreement or divorce that	6e. 6f.	\$ 0.00 \$ 0.00 Total Claim \$ 0.00						
	6e. 6f. 6g.	Total Priority. Add lines 6a th Student loans Obligations arising out of a you did not report as priority	rough 6d. separation agreement or divorce that a claims.	6e. 6f. 6g.	\$ 0.00 \$ 0.00 Total Claim \$ 0.00 0.00						
	6e. 6f.	Total Priority. Add lines 6a th Student loans Obligations arising out of a you did not report as priority Debts to pension or profit-si	rough 6d. separation agreement or divorce that	6e. 6f.	\$ 0.00 \$ 0.00 Total Claim \$ 0.00						

Fill in this inform	mation to identify your	case:			
Debtor 1	James Christoph	er Dean			
	First Name	Middle Name	Last Name)	
Debtor 2	Donna Jeanne De	ean			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENT	то	
Case number					
(if known)				☐ Check if this amended filii	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company witl Name, Numbe	h whom you have the c er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Ivaille				
	Number	Street			_
	Number	Street			
					<u></u>
	City		State	ZIP Code	
2.2					
	Name				_
	Ivallie				
		<u> </u>			<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.3					
2.5					_
	Name				
					<u> </u>
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
2.4					<u> </u>
	Name				
					<u></u>
	Number	Street			
	City		State	ZIP Code	_
2.5	Oity		Ciaio	211 0000	
2.5					<u>_</u>
	Name				
	Number	Street			
	City		State	ZIP Code	_
	City		State	ZIF COUE	

Official Form 106G

Fill in thi	s information to	identify your	case:			
Debtor 1	Jam First N	ies Christoph	er Dean Middle Name	Last Name		
Debtor 2		na Jeanne De				
(Spouse if, f			Middle Name	Last Name		
United St	ates Bankruptcy	Court for the:	EASTERN DISTRICT OF O	CALIFORNIA, SACRA	AMENTO	
Case nun	mher					
(if known)						Check if this is an amended filing
Officia	al Form 1	06H				
Sche	dule H: Y	our Cod	ebtors			12/15
are filing t	together, both a	are equally resp n the boxes on	onsible for supplying corre the left. Attach the Addition	ct information. If mo	re space is needed, co	e as possible. If two married people opy the Additional Page, fill it out, ditional Pages, write your name and
1. Do	you have any	codebtors? (If y	ou are filing a joint case, do no	ot list either spouse as	a codebtor.	
■ No						
			lived in a community prope New Mexico, Puerto Rico, Te			states and territories include Arizona,
			,	, ,	,	
	o. Go to line 3.					
■ Ye	es. Did your spou	se, former spous	se, or legal equivalent live with	you at the time?		
	■ No					
	☐ Yes.					
	In which	community state	or territory did you live?	-NONE-	. Fill in the name a	nd current address of that person.
			ouse, or legal equivalent			
	Number, S	reet, City, State & Zip) Code			
						with you. List the person shown in
						reditor on Schedule D (Official Forr le E/F, or Schedule G to fill out
	mn 2.	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, ,	,
	Column 1: You Name, Number, Str	r codebtor eet, City, State and Z	IP Code		Column 2: The cre	editor to whom you owe the debt
						,
3.1	Name				_	
	Name				☐ Schedule E/F,	
					☐ Schedule G, lir	<u> </u>
	Number	Street	State	ZIP Code	_	
	City		State	ZIF COUR		
					—	
3.2	Name				_ ☐ Schedule D, lin	
	Namo				☐ Schedule E/F,☐ Schedule G, lir	
					— Scriedule G, III	<u> </u>
	Number City	Street	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com Schedule H: Your Codebtors

Fill	in this information to identify y	our case:							
Del	btor 1 James	Christopher Dean			_				
	btor 2 Donna ouse, if filing)	Jeanne Dean			_				
Uni	ited States Bankruptcy Court fo	or the: EASTERN DISTRICT SACRAMENTO DIVIS	,		_				
(If kr	se number nown)					Check if this is: An amende A supplement income as of	ed filing ent showin	01 1	chapter 13
	fficial Form 106l					MM / DD/ Y	YYY		
S	chedule I: Your I	ncome							12/15
spo atta	ouse. If you are separated and	you are married and not filing your spouse is not filing with orm. On the top of any addition	h you, do not includ	le informa	tion ab	out your spou	se. If mor	e space is ne	eded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fi	iling spouse	
	If you have more than one job),	☐ Employed			☐ Empl	oyed		
	attach a separate page with information about additional employers.	Employment status	■ Not employed	■ Not employed					
	Include part-time, seasonal, self-employed work.	Occupation Or Employer's name							
	Occupation may include stude homemaker, if it applies.	dent or Employer's address							
		How long employed th	nere?						
Pai	rt 2: Give Details Abou	t Monthly Income							
	imate monthly income as of tess you are separated.	the date you file this form. If yo	ou have nothing to rep	oort for any	line, w	rite \$0 in the spa	ace. Includ	de your non-filir	ng spouse
	ou or your non-filing spouse hav ce, attach a separate sheet to th	e more than one employer, comb nis form.	oine the information fo	or all emplo	yers for	that person on	the lines b	elow. If you ne	ed more
					Fo	r Debtor 1		ebtor 2 or ing spouse	
2.		salary, and commissions (betthly, calculate what the monthly w		2.	\$	0.00	\$	0.00	
3.	Estimate and list monthly	overtime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. A	add line 2 + line 3.		4.	\$	0.00	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

Debt		Dean, James C	Christopher & Dean, Donna Jeanne		(Case nu	umber (<i>if kr</i>	own)				
	Conv	/ line 4 here		4.		For D	ebtor 1	0.00		Debtor 2 -filing sp		
5.		all payroll deduct	ione:			Ψ		1.00	Ψ		0.00	-
0.	5a.	Tax, Medicare,	and Social Security deductions	5a		\$		0.00	\$		0.00	_
	5b.	-	tributions for retirement plans	5b).	\$		0.00	\$		0.00	_
	5c.	-	ributions for retirement plans	5c		\$		0.00	\$		0.00	_
	5d.	Required repay	ments of retirement fund loans	5d	l.	\$		0.00	\$		0.00	_
	5e.	Insurance		5e		\$		0.00	\$		0.00	_
	5f.	Domestic support	ort obligations	5f.		\$		0.00	\$		0.00	_
	5g.	Union dues		5g	J.	\$		0.00	\$		0.00	_
	5h.	Other deduction	ns. Specify:	5h	1.+	\$		0.00	+ \$		0.00	_
6.	Add	the payroll deduc	ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	0	.00	\$		0.00	-
7.	Calc	ulate total month	ly take-home pay. Subtract line 6 from line 4.	7.		\$	0	.00	\$		0.00	-
8.	List a 8a.	Net income from profession, or f Attach a statemen receipts, ordinary	ent for each property and business showing gross or and necessary business expenses, and the total	8a		\$,		¢		0.00	
	O.L.	monthly net inco				·		0.00	\$		0.00	_
	8b.	Interest and div		8b).	\$		0.00	\$		0.00	-
	8c.	regularly receiv	payments that you, a non-filing spouse, or a depende	nt								
			spousal support, child support, maintenance, divorce									
			property settlement.	8c	:.	\$	(.00	\$		0.00	
	8d.	Unemployment	• •	8d	١.	\$	1,760		\$		0.00	=
	8e.	Social Security		8e		<u>\$</u> —		0.00	<u> </u>	8	99.00	-
	8f.	Include cash ass that you receive, Nutrition Assista	ent assistance that you regularly receive istance and the value (if known) of any non-cash assistanc such as food stamps (benefits under the Supplemental nce Program) or housing subsidies.			Ф.			<u> </u>			-
	0	Specify:		8f.		\$		0.00	\$_		0.00	-
	8g.	Pension or retir		8g		\$		0.00	—	1,2	47.75	_
	8h.	Other monthly i	income. Specify:	8h	ı.+ 	<u>\$</u>		0.00	+ \$_		0.00	-
9.	Add	all other income.	Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	1,760	.00	\$	2,	146.7	5
10.	Calc	ulate monthly inc	come. Add line 7 + line 9.	10.	\$	1,	760.00	+ \$	2,1	46.75	= \$	3,906.75
	Add t	the entries in line	10 for Debtor 1 and Debtor 2 or non-filing spouse.	Ĺ								
11.	Include other	de contributions fro friends or relatives ot include any amo	contributions to the expenses that you list in Schedu om an unmarried partner, members of your household, your s	r depende				-			+\$	0.00
12.			e last column of line 10 to the amount in line 11. The re							s 12.	\$	3,906.75
			•							L	Combir	nod
13.	Do y	ou expect an inci No.	rease or decrease within the year after you file this for	m?								y income
		Yes. Explain:	Debtor lost his job with Sackett Co on March received an unemployment check but he is se							ne. He h	nas ha	s not
			Joint Debtor's Social Security Benefit is \$1,00 insurance. Net is reflected on Sch I. Joint Debtor's Retirement is \$1,527.00 Gross. Net is reflected above.	04.70 G	iros	ss. \$1	104.90 is	s dec	lucted			7.75. The

Official Form 106I Schedule I: Your Income page 2

	in this information to identify your case:				
Deb	-		Chacl	c if this is:	
202	James Christophier Dean			An amended filing	
	tor 2 Donna Jeanne Dean Duse, if filing)			A supplement show expenses as of the	ing postpetition chapter 13 following date:
Unite	ed States Bankruptcy Court for the: EASTERN DISTRICT OF CALIF	FORNIA,	1	MM / DD / YYYY	
	e number				
	ficial Form 106J				
	chedule J: Your Expenses				12/
info	as complete and accurate as possible. If two married people a brmation. If more space is needed, attach another sheet to this mown). Answer every question. 11: Describe Your Household Is this a joint case? No. Go to line 2.				
	■ Yes. Does Debtor 2 live in a separate household?				
	■ No □ Yes. Debtor 2 must file Official Form 106J-2, Expense	es for Separate Househol	dof Debtor	2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the dependents names.				□ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No				☐ Yes
Esti exp app	Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless enses as of a date after the bankruptcy is filed. If this is a suplicable date. ude expenses paid for with non-cash government assistance use of such assistance and have included it on Schedule I: You	plemental Schedule J, o			
	ie of such assistance and have included it on <i>Schedule I: You</i> ficial Form 106I.)	ur income		Your exp	enses
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgage	4. \$		800.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
_	4d. Homeowner's association or condominium dues		4d. \$		0.00
5.	Additional mortgage payments for your residence, such as h	nome equity loans	5. \$		0.00

Official Form 106J Schedule J: Your Expenses page 1

Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: I and housekeeping supplies Icare and children's education costs Ining, laundry, and dry cleaning Ional care products and services Ical and dental expenses Isportation. Include gas, maintenance, bus or train fare. Include car payments. Intellude car payments. Intellude car payments. Intellude contributions and religious donations Include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Ispo not include taxes deducted from your pay or included in lines 4 or 20. Ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Typayments of alimony, maintenance, and support that you did not report as	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	200.00
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: I and housekeeping supplies Idcare and children's education costs Ining, laundry, and dry cleaning Ional care products and services Ical and dental expenses Isportation. Include gas, maintenance, bus or train fare. Iot include car payments. Irtainment, clubs, recreation, newspapers, magazines, and books Initiable contributions and religious donations Irance. Iot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify:	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 180.00 0.00 600.00 0.00 100.00 100.00 250.00 200.00 130.00 130.00 24.00 130.00 0.00 274.00 393.00
Telephone, cell phone, Internet, satellite, and cable services Other. Specify: I and housekeeping supplies Idicare and children's education costs Ining, laundry, and dry cleaning Ional care products and services Ical and dental expenses Isportation. Include gas, maintenance, bus or train fare. Iot include car payments. Irainment, clubs, recreation, newspapers, magazines, and books Iitable contributions and religious donations Irance. Iot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: Ilment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Other. Specify:	6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	180.00 0.00 600.00 100.00 100.00 250.00 250.00 200.00 130.00 24.00 130.00 0.00 274.00 393.00
Other. Specify: If and housekeeping supplies Idicare and children's education costs Ining, laundry, and dry cleaning Ining, laundry	6d. 7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 600.00 100.00 100.00 50.00 250.00 200.00 130.00 24.00 130.00 0.00 274.00 393.00
I and housekeeping supplies Idcare and children's education costs Ining, laundry, and dry cleaning I conal care products and services I cal and dental expenses I sportation. Include gas, maintenance, bus or train fare. I cot include car payments. I ratinment, clubs, recreation, newspapers, magazines, and books I itable contributions and religious donations I rance. I cot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: I no not include taxes deducted from your pay or included in lines 4 or 20. I car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	7. 8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	600.00 0.00 100.00 100.00 50.00 250.00 200.00 130.00 24.00 130.00 0.00 274.00 393.00
dicare and children's education costs ning, laundry, and dry cleaning onal care products and services ical and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	8. 9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 17a.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	0.00 100.00 100.00 50.00 250.00 200.00 0.00 130.00 24.00 130.00 0.00 274.00 393.00
ning, laundry, and dry cleaning onal care products and services ical and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	9. 10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	100.00 100.00 50.00 250.00 200.00 0.00 130.00 24.00 130.00 0.00 274.00 393.00
onal care products and services ical and dental expenses sportation. Include gas, maintenance, bus or train fare. of include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations rance. of include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	10. 11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	100.00 50.00 250.00 200.00 0.00 130.00 24.00 130.00 0.00 0.00 274.00 393.00
cal and dental expenses sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	11. 12. 13. 14. 15a. 15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	50.00 250.00 200.00 0.00 130.00 24.00 130.00 0.00 274.00 393.00
sportation. Include gas, maintenance, bus or train fare. ot include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	12. 13. 14. 15a. 15b. 15c. 15d. 16.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	250.00 200.00 0.00 130.00 24.00 130.00 0.00 274.00 393.00
or include car payments. rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations rance. or include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	13. 14. 15a. 15b. 15c. 15d. 16.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	200.00 0.00 130.00 24.00 130.00 0.00 274.00 393.00
rtainment, clubs, recreation, newspapers, magazines, and books itable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	13. 14. 15a. 15b. 15c. 15d. 16.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	200.00 0.00 130.00 24.00 130.00 0.00 274.00 393.00
itable contributions and religious donations rance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	14. 15a. 15b. 15c. 15d. 16. 17a.	\$	0.00 130.00 24.00 130.00 0.00 0.00 274.00 393.00
tance. ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	15a. 15b. 15c. 15d. 16. 17a.	\$	130.00 24.00 130.00 0.00 0.00 274.00 393.00
ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	24.00 130.00 0.00 0.00 274.00 393.00
Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	24.00 130.00 0.00 0.00 274.00 393.00
Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	15b. 15c. 15d. 16. 17a. 17b.	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	24.00 130.00 0.00 0.00 274.00 393.00
Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	15c. 15d. 16. 17a. 17b.	\$	130.00 0.00 0.00 274.00 393.00
Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	15d. 16. 17a. 17b.	\$ \$ \$	0.00 0.00 274.00 393.00
s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Illment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	16. 17a. 17b.	\$ \$ \$ \$	0.00 274.00 393.00
ify: Ilment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	17a. 17b.	\$ \$	274.00 393.00
Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify:	17b.	\$	393.00
Car payments for Vehicle 2 Other. Specify: Other. Specify:	17b.	\$	393.00
Other. Specify: Other. Specify:		·	
Other. Specify:		\$	0.00
· · ·	—— 17d. 17d.	·	0.00
		Ψ	0.00
icted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
r payments you make to support others who do not live with you.		\$	0.00
ify:	19.		
r real property expenses not included in lines 4 or 5 of this form or on Schee			
Mortgages on other property	20a.	·	0.00
Real estate taxes	20b.	\$	0.00
Property, homeowner's, or renter's insurance	20c.	\$	0.00
Maintenance, repair, and upkeep expenses	20d.	\$	0.00
Homeowner's association or condominium dues	20e.	\$	0.00
r: Specify:	21.	+\$	0.00
ulate your monthly expenses			
· · · · · · · · · · · · · · · · · · ·		l s	3,431.00
			<u> </u>
			2 424 00
		Φ	3,431.00
	23a	\$	3,906.75
		·	3,431.00
John Mortelly expenses from the 220 above.	200.		3,431.00
Subtract your monthly expenses from your monthly income			
The result is your <i>monthly net income</i> .	23c.	\$	475.75
r u A	r: Specify: Ilate your monthly expenses Add lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 Add line 22a and 22b. The result is your monthly expenses. Ilate your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above. Subtract your monthly expenses from your monthly income.	r: Specify:	#: Specify: #: Specify: #: Ilate your monthly expenses #: Add lines 4 through 21. #: Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 #: Add line 22a and 22b. The result is your monthly expenses. #: Ilate your monthly net income. #: Copy line 12 (your combined monthly income) from Schedule I. #: Copy your monthly expenses from line 22c above. #: Subtract your monthly expenses from your monthly income.

☐ No.

■ Yes. Explain here: Some expenses are estimated as Debtors will be surrendering their mobile home.

Fill in this inforn	Fill in this information to identify your case:				
Debtor 1	James Christoph	er Dean			
	First Name	Middle Name	Last Name		
Debtor 2	Donna Jeanne D	ean			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION					
Case number _					

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	Γ an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read that the Porreitmed and correct. X James Christopher Dean Signature of Debtor 1 3/31/2016	X Down Dean Signature of Debtor 2 3/31/2016 Date

Bank of America NC4-105-03-14 PO Box 26012 Greensboro, NC 27420-6012

Bk of Amer PO Box 982238 El Paso, TX 79998-2238

Citi 701 E 60th St N Sioux Falls, SD 57104-0432

Cr Bur USA 757 L St Fresno, CA 93721-2904

Syncb/Sams Club DC PO Box 965005 Orlando, FL 32896-5005

Synchrony Bank/Sams Club Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104

Travis Credit Union PO Box 2069 Vacaville, CA 95696-2069 Travis Fcu PO Box 2069 Vacaville, CA 95696-2069

Travis Federal Credit Union PO Box 2069 Vacaville, CA 95696-2069

Vanderbilt Mortgage Attn: Bankruptcy Dept PO Box 9800 Maryville, TN 37802-9800

Vanderbilt Mortgage 500 Alcoa Trl Maryville, TN 37804-5516

3111	in this informa	tion to identify your	case:			
Del	btor 1	James Christop	her Dean Middle Name	Last Name		
Dal	btor 2	Donna Jeanne [Last Name	Ì	
1	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Bank	cruptcy Court for the:	EASTERN DISTRICT OF DIVISION	CALIFORNIA, SACRAMEN	то	
Cas	se number					
	nown)					☐ Check if this is an
						amended filing
Sta Be a info	as complete and	of Financial A	Affairs for Individ	filing together, both are e	qually responsible fo	12/19 or supplying correct te your name and case number
		• .	rital Status and Where You L	_ived Before		
1.	What is your o	current marital statu	s?			
	■ Married□ Not marrie	ed				
2.	During the las	t 3 vears, have you	lived anywhere other than w	here you live now?		
		,				
	□ No ■ Yes. List a	all of the places you liv	red in the last 3 years. Do not in	nclude where you live now.		
	Debtor 1 Prio	or Address:	Dates Debtor 1 li there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
			From-To:	☐ Same as Debtor 3123 Sonata Di Las Vegas, NV	r	☐ Same as Debtor 1 From-To: 8/2015 - 3/2016
3. state	es and territories ☐ No ☐ Yes. Make	s include Arizona, Cal	ifornia, Idaho, Louisiana, Neva	ada, New Mexico, Puerto Ric		erritory? (Community property and Wisconsin.)
	<u> </u>		ployment or from operating	a business during this ver	ar or the two previous	s calendar voars?
4.	Did vou have	anv income mom en				
4.	Fill in the total	amount of income yo	u received from all jobs and all ave income that you receive too			s calendar years:
4.	Fill in the total	amount of income yo				s calcinual years:
4.	Fill in the total and the state of the state	amount of income yo				s calcinual years:
4.	Fill in the total and the state of the state	amount of income yo a joint case and you h	ave income that you receive too		Debtor 1.	s culcitual years:
4.	Fill in the total and the state of the state	amount of income yo a joint case and you h				

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Dean, James Christopher & Dean, Donna Jeanne Case number (if known) Debtor 2 Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** (before deductions and (before deductions Check all that apply. Check all that apply. exclusions) and exclusions) From January 1 of current year until \$10,560.00 \$0.00 ☐ Wages, commissions, ■ Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For last calendar year: \$2,058.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$32,278.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Nο Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below.. (before deductions and Describe below. (before deductions exclusions) and exclusions) From January 1 of current year until 2016 Tax Refund \$2,669.00 the date you filed for bankruptcy: from 2015 Tax Return Fed: \$2,305 State: \$364 For last calendar year: 2015 - Unemployment \$1.889.00 2015 - Pension \$30,575.00 (January 1 to December 31, 2015) \$1,889 \$18,324 2015 - Social Security \$12,251 \$493.00 2015 Tax Refund from 20014 Tax Return Fed: \$0.00 State: \$493 Fed: \$ For the calendar year before that: 2014 -\$2,226.00 2014 - Pension: \$28,368.00 (January 1 to December 31, 2014) **Unemployment:** \$18,049 \$2,226 2014 - Social Security: \$10,319

	otor 1 otor 2 De	ean, Jame	s Christopher & Dea	an, Donna Jeanne	Cas	se number (if known)		
Dai	rt 3: Lisi	t Cortain Da	ymants Vau Mada Raf	ore You Filed for Bankrup	tev			
6.		Debtor 1's	or Debtor 2's debts pr ebtor 1 nor Debtor 2 ha	imarily consumer debts? Is primarily consumer debts amily, or household purpose	ots. Consumer debts	are defined in 11 U	J.S.C. § 101(8)	as "incurred by an
		During the No. Yes	90 days before you filed Go to line 7. List below each creditor creditor. Do not includ payments to an attorne	for bankruptcy, did you pay or to whom you paid a total of le payments for domestic st ey for this bankruptcy case. It is and every 3 years after that	any creditor a total of f \$6,225* or more in cupport obligations, su	one or more payme uch as child suppor	rt and alimony.	
	■ Yes.			re primarily consumer deb for bankruptcy, did you pay		\$600 or more?		
		■ No. □ Yes		or to whom you paid a total o c support obligations, such a				
	Creditor'	's Name and	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
 Within 1 year before you filed for bankrupt Insiders include your relatives; any general par which you are an officer, director, person in co business you operate as a sole proprietor. 11 l No Yes. List all payments to an insider 			elatives; any general part er, director, person in con as a sole proprietor. 11 U	ners; relatives of any genera atrol, or owner of 20% or more	l partners; partnershi re of their voting secu	ps of which you are rities; and any man	e a general part aging agent, in	ner; corporations of cluding one for a
	Insider's	Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	 Within 1 year before you filed for bankrup insider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider 		lebts guaranteed or cosig		nents or transfer ar	ny property on ac	count of a deb	ot that benefited an
	Insider's	Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment
Par	rt 4: Ide	ntify Legal A	Actions, Repossession	s. and Foreclosures	pu.u	5 5.115		
9.	Within 1 y List all suc and contra	ear before	you filed for bankrupto	cy, were you a party in any cases, small claims actions,				
	Case title			Nature of the case	Court or agency		Status of th	e case
10.	Within 1 y Check all	ear before that apply ar	you filed for bankruptond fill in the details below	cy, was any of your prope v.	rty repossessed, fo	reclosed, garnish	ed, attached,	seized, or levied?
		Name and		Describe the Property		Date		Value of the
				Explain what happened				property

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	botor 1 Dean, James Christopher & Dean,	Donna Jeanne Case number	(if known)	
	accounts or refuse to make a payment because No	you owed a debt?		
	Yes. Fill in the details. Creditor Name and Address D	escribe the action the creditor took	Date action was	Amount
			taken	
12.	Within 1 year before you filed for bankruptcy, w court-appointed receiver, a custodian, or anoth	as any of your property in the possession of an a er official?	ssignee for the benefi	t of creditors, a
	No			
	Yes			
Par	t 5: List Certain Gifts and Contributions			
13.	_	did you give any gifts with a total value of more th	an \$600 per person?	
	■ No☐ Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$600 per	Describe the gifts	Dates you gave	Value
	person		the gifts	
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankruptcy,	did you give any gifts or contributions with a total	value of more than \$6	600 to any charity
	■ No			
	Yes. Fill in the details for each gift or contributi		_	
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses			
	•	r since you filed for bankruptcy, did you lose anyth	ning because of theft,	fire, other disaster,
	■ No			
	☐ Yes. Fill in the details.			
	how the loss occurred	ribe any insurance coverage for the loss	Date of your loss	Value of property lost
	Includ	de the amount that insurance has paid. List pending ance claims on line 33 of <i>Schedule A/B: Property.</i>		
Par	t 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepari	id you or anyone else acting on your behalf pay on ng a bankruptcy petition? , or credit counseling agencies for services required in		y to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Bankruptcy Law Group, PC 1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923	Attorney Fee: \$0.00, \$1,700 balance will be paid post-filing Court Fee: \$335 Costs: \$100 (Credit Report & Educational Courses)		\$435.00

	tor 1 tor 2 Dean, James Christopher & Dean	, Donna Jeanne		Case number	(if known)		
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.						
	NoYes. Fill in the details.						
	Person Who Was Paid Address	Description and va transferred	alue of any prop	perty	Date payment or transfer was made	Amount of payment	
	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers made gifts and transfers that you have already listed on No Yes. Fill in the details.	siness or financial affair as security (such as the	s?				
	Person Who Received Transfer Address	Description and va property transferr			any property or received or debts change	Date transfer was made	
	Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.						
	Name of trust Description and value of			f the property transferred Date Tran made			
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for you sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.					-		
		Last 4 digits of account number	Type of accou instrument	clo mo	te account was osed, sold, oved, or insferred	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 ye cash, or other valuables? No Yes. Fill in the details.	ar before you filed for k	pankruptcy, any	safe deposit	box or other deposito	ory for securities,	
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, St and ZIP Code)		Describe the	contents	Do you still have it?	
22.	Have you stored property in a storage unit or	,	nome within 1 ye	ear before you	ı filed for bankruptcy		
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St and ZIP Code)		Describe the	contents	Do you still have it?	

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for

	btor 1 btor 2 Dean, James Christopher & Dean, I	Donna Jeanne	Case number (if known)					
	someone.							
	■ No							
	☐ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value				
Pa	rt 10: Give Details About Environmental Informa	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai controlling the cleanup of these substances, wa	r, land, soil, surface water, groundw	· ·					
	Site means any location, facility, or property as own, operate, or utilize it, including disposal site	-	w, whether you now own, operate, or	utilize it or used to				
	Hazardous material means anything an environ material, pollutant, contaminant, or similar term		vaste, hazardous substance, toxic su	bstance, hazardous				
Rep	port all notices, releases, and proceedings that yo	ou know about, regardless of when t	hey occurred.					
24.	Has any governmental unit notified you that you	u may be liable or potentially liable ເ	under or in violation of an environme	ntal law?				
	■ No							
	☐ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of any	lave you notified any governmental unit of any release of hazardous material?						
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or adminis	strative proceeding under any enviro	onmental law? Include settlements ar	nd orders.				
	-							
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Da	rt 11: Give Details About Your Business or Con	·						
		<u>-</u>						
27.	Within 4 years before you filed for bankruptcy, o	•		business?				
	☐ A sole proprietor or self-employed in a t	•	·					
	☐ A member of a limited liability company	(LLC) or limited liability partnership	(LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing execut							
	An owner of at least 5% of the voting or	adulty sacurities at a cornoration						

Official Form 107

	otor 1 otor 2 Dean, James Christopher & Dea	an, Donna Jeanne Ca	se number(if known)
	■ No. None of the above applies. Go to F □ Yes. Check all that apply above and fill	Part 12. I in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties. No Yes. Fill in the details below.	ccy, did you give a financial statement to any	one about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
I hav true ban		e statement, concealing property, or obtaini	clare under penalty of perjury that the answers are ng money or property by fraud in connection with a oth.
Jai	nes Christopher Dean nature of Debtor 1 3/31/2016	Don72858/AAAAA Dean Signature of Debtor 2 3/31/2016 Date	
Did ■ N □ Y		nt of Financial Affairs for Individuals Filing I	for Bankruptcy (Official Form 107)?
		t an attorney to help you fill out bankruptcy to ptcy Petition Preparer's Notice, Declaration, and	

Fill in this infor	rmation to identify your cas	se:	Check one box only as directed
Debtor 1	James Christopher	Dean	122A-1Supp:
Debtor 2 (Spouse, if filing)	Donna Jeanne Dea	n	1 . There is no presumptio
United States	Bankruptcy Court for the:	Eastern District of California, Sacramento Division	□ 2. The calculation to determine applies will be made u Calculation (Official Fo
Case number			☐ 3. The Means Test does n military service but it co
			☐ Check if this is an ame
	orm 122A - 1 7 Statement c	of Your Current Mont	hly Income
a separate sheet number (if know	t to this form. Include the lin n). If you believe that you a	e number to which the additional informa re exempted from a presumption of abuse	oth are equally responsible for being accuration applies. On the top of any additional pbecause you do not have primarily consurble Under § 707(b)(2) (Official Form 122A-1S
Part 1: Ca	alculate Your Current Mo	onthly Income	
1. What is y	your marital and filing sta	atus? Check one only.	
☐ Not m	narried. Fill out Column A,	lines 2-11.	

Check one box only as directed in this form and in Form 122A-1Supp:
■ 1. There is no presumption of abuse
2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
☐ 3. The Means Test does not apply now because of qualified

ould apply later. ended filing

12/15

te. If more space is needed, attach ages, write your name and case ner debts or because of qualifying upp) with this form.

	■ Married and your spouse is filing with you. Fill ou	t both (Jolumns /	A and B, lines 2	2-11.				
	☐ Married and your spouse is NOT filing with you.	You an	d your sp	pouse are:					
	\square Living in the same household and are not legal	lly sep	arated. Fi	ill out both Colu	ımns .	A and B, lines 2-	11.		
	☐ Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are leg apart for reasons that do not include evading the M	ally sep	parated un	nder nonbankrup	otcy la	w that applies or	_		
10 6	ill in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6-m months, add the income for all 6 months and divide the total by we will the same rental property, put the income from that property in	onth pe 3. Fill in	riod would the result.	be March 1 throu Do not include an	gh Au	gust 31. If the amo	unt of your han once.	monthly income vari For example, if both	ed during the
					Colu Debt	mn A cor 1	Column Debtor non-fili	. —	
2.	Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and co	mmissior	ns (before all	\$	2,884.29	\$	0.00	
3.	Alimony and maintenance payments. Do not include Column B is filled in.	payme	nts from a	a spouse if	\$	0.00	\$	0.00	
4.	All amounts from any source which are regularly pa of you or your dependents, including child support. from an unmarried partner, members of your household, roommates. Include regular contributions from a spouse Do not include payments you listed on line 3	Include your de	e regular o	contributions , parents, and	ı. \$	0.00	\$	0.00	
5.	Net income from operating a business, profession, o	or farm							
			Deb	otor 1					
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	-\$_	0.00						
	Net monthly income from a business, profession, or farm	m \$ _	0.00	Copy here ->	\$	0.00	\$	0.00	
6.	Net income from rental and other real property								
			Deb	otor 1					
	Gross receipts (before all deductions)	\$_	0.00						
	Ordinary and necessary operating expenses	-\$_	0.00						
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	0.00	

0.00 Copy here -> \$

\$

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

0.00

\$

0.00

Debtor 1 Dean, James Christopher & Dean, Donna Jeanne Case number (if known) Debtor 2 Column A Column B Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse \$ 0.00 Pension or retirement income. Do not include any amount received that was a benefit 0.00 1,527.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 2.884.29 1.527.00 4.411.29 each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 4,411.29 Multiply by 12 (the number of months in a year) **x** 12 52,935.48 12b. The result is your annual income for this part of the form 12h 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. CA Fill in the number of people in your household. 66,458.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy cleix office. 14. How do the lines compare? 14a. Line 12b is less than or equal to line 13. On the top of page 1, check box 17, here is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signified because under penalty of perjury that the information on this signified and in any attachments is true and correct. James Ohnstopher Dean Donna Jeanne Dean Signature of Debtor 2

Official Form 122A-1

Date

Date

3/31/2016

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

MM / DD / YYYY

Fill in this infor	rmation to identify your case:		
Debtor 1	James Christopher Dean		
200101	First Name Middle Name	Last Name	
Debtor 2	Donna Jeanne Dean		
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	ankruptcy Court for the: EASTERN DIST	RICT OF CALIFORNIA, SACRAMENTO	
Case number			
(if known)			Check if this is an amended filing
			amended illing
If you are an ind creditors have you have lea You must file th which the for If two married pound da Be as complete write y	dividual filing under chapter 7, you must five claims secured by your property, or used personal property and the lease has rais form with the court within 30 days after ever is earlier, unless the court extends the must be are filing together in a joint case, boate the form.		or the meeting of creditors, editors and lessors you list on mation. Both debtors must sign
		D: Creditors Who Have Claims Secured by Property (O	official Form 106D), fill in the
information b	elow.		
identify the c	reditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	Travis Fcu	☐ Surrender the property.	= v.
name:		☐ Retain the property and redeem it.	■ No
Description of	f 2007 Dodge Caliber	■ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
property	f 2007 Dodge Caliber	Agreement.	
securing debt	:	☐ Retain the property and [explain]:	-
	Travis Federal Credit Union	☐ Surrender the property.	No
name:		Retain the property and redeem it.	□Yes
Description of	f 2014 Ford Focus	Retain the property and enter into a Reaffirmation Agreement.	⊔ Yes
property		Retain the property and [explain]:	
securing debt	t		-
Creditor's	Vanderbilt Mortgage	Currender the prepart	□ No
name:	Tanaerbiit mortgage	☐ Surrender the property. ☐ Retain the property and redeem it.	□ INO
		Retain the property and enter into a <i>Reaffirmation</i>	Yes

Agreement.

☐ Retain the property and [explain]:

Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

page 1

property

Description of 2008 Fleetwood Expression

Debtor 1 Debtor 2 Dean, James Christopher & Dean, Donna Jeanne	Case number (if known)
securing debt:	
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Execut the information below. Do not list real estate leases. Unexpired leases are leases may assume an unexpired personal property lease if the trustee does not assum	that are still in effect; the lease period has not yet ended. You
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No
X X X	roperty of my estate that secures a debt and any personal cocusioned by: Discontinuous debt and any personal

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California, Sacramento Division

In r	Dean, James Christopher & Dean, Donna Jeanne)	Case N	0.	
		Debtor(s)	Chapte	r 7	
	DISCLOSURE OF COMPENSA	ATION OF ATTO	ORNEY FOR	R DEBTOR	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of t be rendered on behalf of the debtor(s) in contemplation of or i	he petition in bankruptc	y, or agreed to be	paid to me, for services rer	
	For legal services, I have agreed to accept		\$	1,700.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	1,700.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compensation firm.	ion with any other person	n unless they are	members and associates of	my law
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of				w firm. A
5.	In return for the above-disclosed fee, I have agreed to render	legal service for all aspec	cts of the bankrup	tcy case, including:	
	a. Analysis of the debtor's financial situation, and rendering ab. Preparation and filing of any petition, schedules, statementc. Representation of the debtor at the meeting of creditors andd. [Other provisions as needed]	t of affairs and plan whic	h may be require	1;	uptcy;
6.	By agreement with the debtor(s), the above-disclosed fee does Motion work and representation in an advers		ng service:		
	CEI	RTIFICATION			
this	I certify that the foregoing is a complete statement of any agree bankruptcy proceeding.	pement or arrangement for Docusigned by: Paul Bailus	or payment to me	for representation of the de	ebtor(s) in
_	3/31/2016				_
	Date Control of the C	Paul deep Bains Signature of Attorne			
		Bankruptcy Law			
		1851 Heritage Ln	Ste 298		
		Sacramento, CA		7260	
		(707) 422-8500 l paulb@bankrupt		200	
		Name of law firm	- 7 - 3		_

Blumberg, Jason (USTP)

From: Blumberg, Jason (USTP)

Sent: Thursday, April 21, 2016 11:43 AM

To: Blumberg, Jason (USTP) **Subject:** Wet Signature Request

Attachments: Broumley - Signed Docs.pdf; Dean - Signed Docs.pdf; Pagan - Signed Docs.pdf;

Mayfield - Signed Docs.pdf

From: Paul Bains [mailto:paulb@bankruptcylg.com]

Sent: Thursday, April 07, 2016 12:48 PM To: Garcia, Irma (USTP); Chad Johnson Subject: Re: Wet Signature Request

Ms. Garcia,

Please see attached. Let me know if anything else is needed.

On Thu, Apr 7, 2016 at 8:26 AM, Garcia, Irma (USTP) < Irma. Garcia@usdoj.gov> wrote:

Re: Broumley, Janis Ann-

Case #: 2016-22021

Date Filed: 03/31/2016

Re: Pagan, Richard

Case #: 2016-22022

Date Filed: 03/31/2016

Re: Dean, James C & Donna J.

Case #: 2016-22023

Date Filed: 03/31/2016

Re: Mayfield, Stanley

Case #: 2016-22134

Case 16-22134 Filed 05/03/16 Doc 15

Date Filed: 04/04/2016

Dear Mr. Bains:
EDCA Local Rule 9004-1 requires that when an attorney electronically files a document containing a "/s/name" instead of an actual signature of anyone other than the attorney, the attorney is required to possess an actual signature on the document before it is filed, and he must maintain it for no less than three years after the case closes. Further the attorney is required to produce the wet signature upon request of the United State Trustee. On March 31, 2016 and April 4, 2016, you electronically filed the bankruptcy case listed above using the /s/ signature convention on the petition and schedules.
In accordance with our duty to supervise the administration of bankruptcy cases under 28 U.S.C. § 586, we request that by close of business today, you fax (916 930-2099) or scan and email me a copy of the ORIGINAL "wet signature" of the debtor on all documents filed with the court in the above cases.
Sincerely
Irma H. Garcia
Legal Data Tech.
<u>(916) 930-2082</u>
Irma H. Garcia
U.S. Trustee Office
Eastern District of California

an

501 I Street, Suite 7-500

Sacramento, CA 95814

(916) 930-2082

--

Thank you.

Please click here for our recently updated blog.

Paul Bains, Esq. Bankruptcy Law Group, PC

SACRAMENTO CLIENTS: We have moved from Suite 130 to Suite 298. Please see our new address below. Thank you

1851 Heritage Lane, Suite 298 1652 West Texas, Suite 207

Sacramento, CA 95815 Fairfield, CA 94533 PH: 916-678-5000 PH: 707-422-8500 FX: 888-843-7260 FX: 888-843-7260

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UNITED STATES BANKRUPTCY COURT Eastern District of California, Sacramento Division

In re)	
Broumley, Janis Ann)	
)	Case No.
)	
	Debtor(s).)	
)	

VERIFICATION OF MASTER ADDRESS LIST

I (we) declare under penalty of perjury that the Master Address List submitted for filing in this case is a true, correct, and complete listing.

I (we) acknowledge that the accuracy and completeness of the Master Address List is the shared responsibility of the debtor(s) and the debtor's(s') attorney or bankruptcy petition preparer, if any.

I (we) further acknowledge that the Court will rely on the Master Address List for all mailings, and that the various schedules and statements required by the Bankruptcy Code and the Federal Rules of Bankruptcy Procedure will not be used for mailing purposes.

3/29/2016 DATED:	Janis Brownley
	Debtor's Signature
DATED:	
	Joint Debtor's (if any) Signature

Submit this form and your Master Address List to one of the following addresses:

Sacramento Division 501 I Street, Suite 3-200 Sacramento, CA 95814 Modesto Division
Mailing Address:
501 I Street, Suite 3-200
Sacramento, CA 95814

Fresno Division 2500 Tulare Street, Suite 2501 Fresno, CA 93721

Physical Address: 1200 I Street, Suite 4 Modesto, CA 95354

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION	
Case number (if known):	

Official Form 121

Statement About Your Social Security Numbers

12/15

Use this form to tell the court about any Social Security or federal Individual Taxpayer Identification numbers you have used. Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.

To protect your privacy, the court will not make this form available to the public. You should not include a full Social Security Number or Individual Taxpayer Number on any other document filed with the court. The court will make only the last four digits of your numbers known to the public. However, the full numbers will be available to your creditors, the U.S. Trustee or bankruptcy administrator, and the trustee assigned to your case.

Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	For Debtor 1:	For Debtor 2 (Only if Spouse is Filing:)
. Your name	Janis	
	First name	First name
	Ann	
	Middle name	Middle name
	Broumley	
	Last name	Last name
rt 2: Tell the Court Abo	out all of Your Social Security or Federal Individual Tax	payer Identification Numbers
All Social Security Numbers you have used	-6324	
	☐ You do not have a Social Security Number	☐ You do not have a Social Security Number
All federal Individual Taxpayer Identification		
Numbers (ITIN) you have used	■ You do not have an ITIN.	☐ You do not have an ITIN.
art 3: Sign Below		
	Under poolity of prince I declare that the information I have and correct. James Browney	Under penalty of perjury, I declare that the information have provided in this form is true and correct.
	Janis Ann Broumley Signature of Debtor 1	Signature of Debtor 2
	3/29/2016	Data
	Date	Date

United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION
EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION
Case number (if known) Chapter you are filing under:
■ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on	Janis		
	your government-issued picture identification (for	First name	_	First name
	example, your driver's	Ann		
	license or passport).	Middle name		Middle name
	Bring your picture identification to your meeting	Broumley		
	with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or	Janis A Broumley Janis Broumley		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6324		

DocuSign Envelope ID: C4D18431-33A6-4297-9EFA-5A1CF377DAAF CASE 10-22134

Filed 05/03/16

Doc 15

Debtor 1 Broumley, Janis Ann

Case number (if known)

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
Where you live	2213 Santa Fe Ct	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Solano County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINs Where you live 2213 Santa Fe Ct Fairfield, CA 94533-2241 Number, Street, City, State & ZIP Code Solano County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.

DocuSign Envelope ID: C4D18431-33A6-4297-9EFA-5A1CF377DAAF CASE 10-22134

Debtor 1 Broumley, Janis Ann

Filed 05/03/16

Doc 15

Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Cl	napter 7						
		☐ CI	napter 11						
		☐ CI	napter 12						
		□ CI	napter 13						
3.	How you will pay the fee	•	about how you	u may pay. Typicall y is submitting you	y, if you are paying the fee yours	with the clerk's office in your local court for more details elf, you may pay with cash, cashier's check, or money of ttorney may pay with a credit card or check with a			
			I need to pay	the fee in install	ments. If you choose this option	, sign and attach the Application for Individuals to Pay 7			
			•	nstallments (Officia t my fee he waive	, , , , , , , , , , , , , , , , , , ,	only if you are filing for Chapter 7. By law, a judge may, l			
			not required to your family size	o, waive your fee, a ze and you are unal	nd may do so only if your income	e is less than 150% of the official poverty line that applie). If you choose this option, you must fill out the <i>Applica</i>			
).	Have you filed for bankruptcy within the last	■ No							
	8 years?	☐ Ye	s.						
			District		When	Case number			
			District		When	Case number			
			District		When	Case number			
0.	Are any bankruptcy cases pending or being filed by	■ No	1						
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.						
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
1.	Do you rent your residence?	□ No	. Go to I	ine 12.					
	residence?	■ Ye	s. Has yo	ur landlord obtaine	d an eviction judgment against ye	ou and do you want to stay in your residence?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial</i> bankruptcy petition		dgment Against You (Form 101A) and file it with this			

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of any full- or part-time business? A sole proprietorship is a business you perate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Wumber, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Num	Deb	otor 1 Broumley, Janis A	Ann			Case number (if known)			
As deep proprietor of any full- or part-time business? yes. A side proprietorship is a business you operate sea an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code Number, Street, City, State									
As del proprietor of any full- or part-time business?	Par	Report About Any Rus	sinesses \	You Own	as a Sole Propriete	or			
A sole proprietorship is a business, you operate as an individual, and is not a separate legilar entity such as a confortion, partnership, of I will be petition. Name of business, if any				. ou own	us a cole i ropried	•			
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Wumber, Street, City, State & ZIP Code	12.	of any full- or part-time	■ No.	Go to	Part 4.				
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Dusiness you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Would have more than one sole proprietorship, use a separate sheet and attach it to this petition. Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(65)) None of the above Are you filling under Chapter 11 of the Bankruptcy Code and are you a small business debtor as a small business debtor. See 11 U.S.C. § 101(51D). No. I am not filling under Chapter 11. be court must know whether you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 101(51D). No. I am not filling under Chapter 11. but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. What is the hazard? Yes. What is the property? Yes. What is the property? Yes. Where is the property? Yes. Where is the property? Yes. Where is the property? Yes. Yes. Yes Yes		A sole proprietorship is a							
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to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(63A)) Commodity Broker (as defined in 11 U.S.C. § 101(60)) None of the above 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor as a small business debtor, see 11 U.S.C. § 101(61D). I am not filing under Chapter 11. (I am NoT a small business debtor according to the definition in the Bankruptcy Code. Yes.		sole proprietorship, use a		Num	ber, Street, City, Sta	tte & ZIP Code			
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None of the above				_	•	- ' '			
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(S1D). I am not filing under Chapter 11, the court must know whether you are a small business debtor operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 101(S1D). No. I am not filing under Chapter 11. No. I am filing und					· ·				
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Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property?		business debtor, see 11	□ No.			11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
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perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs?		any property that needs							
Number, Street, City, State & Zip Code		perishable goods, or livestock that must be fed, or a building that needs		Where i	s the property?				
						Number, Street, City, State & Zip Code			

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Debtor 1 Broumley, Janis Ann Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:

П Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Par	6: Answer These Question	ons for Re	norting Purposes					
	What kind of debts do you have?	16a.	Are your debts prim individual primarily for	arily consumer debts? Consumer debts are de a personal, family, or household purpose."	efined in 11 U.S.C.§ 101(8) as "incurred by an			
			☐ No. Go to line 16b					
			Yes. Go to line 17					
		16b.		arily business debts? Business debts are debts the through the operation of the business of				
			☐ No. Go to line 16d					
			☐ Yes. Go to line 17					
		16c.	State the type of debt	you owe that are not consumer debts or busines	ss debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under (Chapter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		ter 7. Do you estimate that after any exempt proper available to distribute to unsecured creditors?	erty is excluded and administrative expenses are			
	administrative expenses are paid that funds will be		■ No					
	available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	□ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Par	7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, Units States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
				I did not pay or agree to pay someone who is not e required by 11 U.S.C. § 342(b).	an attorney to help me fill out this document, I			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		Jani	s Brownley >\$2	ement, concealing property, or obtaining money or 50,000, or imprisonment for up to 20 years, or bot	r property by fraud in connection with a bankruptcy th. 18 U.S.C. §§ 152, 1341, 1519, and 3571.			
		Janus A	e of Debtor 1	Signature of Deb	btor 2			
		Executed	3/29/2016	Evacutad on	Executed on			
		LACCUICU	MM / DD / YYY		Executed on MM / DD / YYYY			

DocuSign Envelope ID: C4D18431-33A6-4297-9EFA-5A1CE377DAAE Filed 05/03/16 Doc 15 Debtor 1 Broumley, Janis Ann Case number (if known) For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under represented by one Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in If you are not represented by which \$ 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the pocusigned by: an attorney, you do not need to file this page. 'aul Bains 3/29/2016 Date F2855C68E7B449E... for Debtor MM / DD / YYYY **Pauldeep Bains** Bankruptcy Law Group, PC 1851 Heritage Ln Ste 298

Email address

paulb@bankruptcylg.com

Sacramento, CA 95815-4923
Number, Street, City, State & ZIP Code
Contact phone (707) 422-8500

268004Bar number & State

EXHIBIT 6

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Certificate Number: 17572-CAE-CC-027160174



CERTIFICATE OF COUNSELING

I CERTIFY that on March 22, 2016, at 1:35 o'clock PM PDT, Janis Broumley received from Dollar Learning Foundation, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 22, 2016 By: /s/Sylvia Araya

Name: Sylvia Araya

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill i	n this inforn	nation to identify your	case:				
Debt	or 1	Janis Ann Broun	Niddle Name	Last Name			
Debt	or 2	i iist ivaille	Middle Name	Last Name			
(Spou	se if, filing)	First Name	Middle Name	Last Name			
Unite	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENTO			
Case (if kno	e number _					Charl	. if the in the man
(II KIIO	wii)					_	cif this is an ded filing
Off	icial Fo	rm 106Sum					
Sur	nmary c	of Your Assets	and Liabilities ar	nd Certain Statistical Informati	on		12/15
infori	mation. Fill o	out all of your schedule	s first; then complete the	are filing together, both are equally responsible information on this form. If you are filing among the box at the top of this page.			
						Your a	ssets If what you own
1.	Schedule A 1a. Copy lin	/B: Property (Official Fore 55, Total real estate, for	orm 106A/B) rom Schedule A/B			\$	0.00
	1b. Copy lin	e 62, Total personal prop	perty, from Schedule A/B			\$	13,766.56
	1c. Copy lin	e 63, Total of all property	on Schedule A/B			\$	13,766.56
Part	2. Summ	arize Your Liabilities					,
rait	Z. Odilili	arize rour Liabilities				V P	-1.990
							abilities t you owe
2.			aims Secured by Property (nn AAmount of claim, at the	(Official Form 106D) e bottom of the last page of Part 1 of <i>Schedule D.</i>		\$	0.00
3.			Insecured Claims (Official			Φ.	0.00
	3a. Copy th	e total claims from Part	1 (priority unsecured claims	s) from line 6e &chedule E/F		\$	0.00
	3b. Copy th	e total claims from Part	2 (nonpriority unsecured cl	aims) from line 6j oschedule E/F		\$	26,070.00
				Your total liab	ilities	\$	26,070.00
			_		Ĺ		
Part	3: Summ	arize Your Income and	Expenses				
4.	Schedule I: Copy your o	Your Income(Official Forcement Force	rm 106I) e from line 12 o \$ chedule I.			\$	1,382.00
5.	Schedule J: Copy your m	Your Expenses (Official nonthly expenses from line	Form 106J) e 22c of <i>Schedule J</i>			\$	1,481.68
Part	4: Answe	er These Questions for	Administrative and Statis	stical Records			
6.	-		er Chapters 7, 11, or 13? on this part of the form. Che	eck this box and submit this form to the court with	your oth	ner schedu	les.
7.	Yes What kind	of debt do you have?					
				lebts are those "incurred by an individual primarily cal purposes. 28 U.S.C§ 159.	for a pe	ersonal, far	nily, or household
		lebts are not primarily or it is in the primarily or it is some content of the primarily or it is in the primarily or it i	consumer debts. You have	e nothing to report on this part of the form. Check	this bo.	x and subr	nit this form to the

Summary of Your Assets and Liabilities and Certain Statistical Information

Official Form 106Sum

page 1 of 2

Debtor 1 Broumley, Janis Ann

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total claim	
From Part 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

		Case 10-2213	64 Fileu 05/03/16 L)0C 12	
Fill in this infor	mation to identify your ca	se and this filing:			
Debtor 1	Janis Ann Broumle	ev			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the: E	ASTERN DISTRICT	OF CALIFORNIA, SACRAMENTO	DIVISION	
Case number	_				
Case number					☐ Check if this is an amended filing
Official Fo	orm 106A/B				
-	le A/B: Prope	ertv			12/15
			once. If an asset fits in more than	one category, list the asse	
	re space is needed, attach a s		ried people are filing together, both a orm. On the top of any additional page		
Part 1: Describe	Each Residence, Building, L	and, or Other Real Esta	ate You Own or Have an Interest In		
1. Do you own or	have any legal or equitable ir	terest in any residence	, building, land, or similar property?	?	
		, , , , , , , , , , , , , , , , , , , ,	,		
■ No. Go to Pa □ Yes. Where					
Tes. Where	is the property:				
Part 2: Describe	e Your Vehicles				
	ves. If you lease a vehicle, al	•	le G: Executory Contracts and Un	expired Leases.	
3.1 Make:	Kia		terest in the property? Check one	the amount of any se	red claims or exemptions. Put ecured claims on Schedule D:
Model: Year:	2015	Debtor 1 on	•		Claims Secured by Property.
-	ate mileage: 550		,	Current value of the entire property?	e Current value of the portion you own?
Other infor	rmation:	At least one	of the debtors and another		
		☐ Check if thi	s is community property	\$11,276.0	\$11,276.00
Examples: Boa No Yes S Add the dollaryou have att Part 3: Describe	ats, trailers, motors, persona	watercraft, fishing vestions of the state of	enal vehicles, other vehicles, and seels, snowmobiles, motorcycle acceptation and the seeds of t	ny entries for pages	\$11,276.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
	oods and furnishings ajor appliances, furniture, lin	ens china kitchenwor	Δ		
Examples: Ma ☐ No	ajoi appiiances, turniture, lin	ens, china, kitchenwar	U		

Schedule A/B: Property

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Official Form 106A/B

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$1,000.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

Official Form 106A/B
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Schedule A/B: Property

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

■ No

Official Form 106A/B Schedule A/B: Property page 3

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No
Yes. Describe each claim........

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims
No
Yes. Describe each claim........

Official Form 106A/B
Schedule A/B: Property

page 4

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EXHIBIT 6
204

uSign Envelope ID: C4D18431-33A6-4297-9EEA-5A1CE377DAAE CASE 16-22134	Filed 05/03/16	Doc 15	
Debtor 1 Broumley, Janis Ann		Case number (if known)	
35. Any financial assets you did not already list			
No			
☐ Yes. Give specific information			
36. Add the dollar value of all of your entries from Part 4, includi Part 4. Write that number here			\$1,490.56
Part 5: Describe Any Business-Related Property You Own or Have an Inc	terest In. List any real estat	e in Part 1.	
37. Do you own or have any legal or equitable interest in any business-rela	ated property?		
No. Go to Part 6.			
☐ Yes. Go to line 38.			
Part 6: Describe Any Farm- and Commercial Fishing-Related Property Yo	OU Own or Have an Interest	In	
If you own or have an interest in farmland, list it in Part 1.	ou own or have an interest	111.	
46. Do you own or have any legal or equitable interest in any farm	- or commercial fishing-	related property?	
No. Go to Part 7.		relation property :	
Yes. Go to line 47.			
Part 7: Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
53. Do you have other property of any kind you did not already lis	et?		
Examples: Season tickets, country club membership	,		
■ No			
☐ Yes. Give specific information			
54. Add the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
54. Add the donar value of all of your entries from Fait 7. Write t	nat number nere	_	\$0.00
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$0.0
55. Fail I. Iblai feal estate, life 2			
56. Part 2: Total vehicles, line 5	_		Ψ0.0
56. Part 2: Total vehicles, line 5	\$11,276.00		
	\$11,276.00 \$1,000.00		
56. Part 2: Total vehicles, line 557. Part 3: Total personal and household items, line 15	\$11,276.00 \$1,000.00 \$1,490.56		
 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 	\$11,276.00 \$1,000.00		
 56. Part 2: Total vehicles, line 5 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 59. Part 5: Total business-related property, line 45 	\$11,276.00 \$1,000.00 \$1,490.56 \$0.00		

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$13,766.56

Vehicle Appraisal

Page 1 of 1



DATE: 3/28/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

VEHICLE INFORMATION:

YEAR: 2015 CONDITION: Average

MAKE: Kia MILEAGE: 5500

ZIP CODE: 94533 **MODEL:** Soul

STYLE: 4dr Wagon (1.6L 4cyl 6A)

OPTIONS:

RETAIL

TRADE IN

PRIVATE PARTY

Edmunds.com TMV® \$12,207.00

\$10,072.00

\$11,276.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any options. (If no Zip Code was provided, this price is the national price.)

DATA PROVIDED BY



Fill in this infor	mation to identify your	case:		
Debtor 1	Janis Ann Broun	nley		
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENTO	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	on you own		Specific laws that allow exemption
	Copy the value from Schedule A/B	CHE	eck only one box for each exemption.	
Kia Soul	\$11,276.00		\$5,100.00	CCCP § 703.140(b)(2)
2015 5500 Line from Schedule A/B 3.1			100% of fair market value, up to any applicable statutory limit	
Kia Soul	\$11,276.00		\$1,350.00	CCCP § 703.140(b)(5)
2015 5500 Line from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit	
Kia Soul	\$11,276.00		\$4,826.00	CCCP § 703.140(b)(5)
2015 5500 Line from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit	
Household Goods Line from Schedule A/B 6.1	\$100.00		\$100.00	CCCP § 703.140(b)(3)
Line Hom Schedule AVB. 0.1			100% of fair market value, up to any applicable statutory limit	

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Electronics	\$300.00		\$300.00	CCCP § 703.140(b)(3)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Smith and Wesson 9mm	\$200.00		\$200.00	CCCP § 703.140(b)(3)
Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B 11.1	\$300.00		\$300.00	CCCP § 703.140(b)(3)
			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	CCCP § 703.140(b)(4)
			100% of fair market value, up to any applicable statutory limit	
Cash on Hand Line from Schedule A/B 16.1	\$1,350.00		\$1,350.00	CCCP § 703.140(b)(10)(A)
			100% of fair market value, up to any applicable statutory limit	
Travis Credit Union 8-317	\$18.00		\$0.00	CCCP § 703.140(b)(10)(A)
			100% of fair market value, up to any applicable statutory limit	
Travis Credit Union 8-317 Line from Schedule A/B 17.1	\$18.00		\$18.00	CCCP § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Travis Credit Union 8-086	\$5.00		\$0.00	CCCP § 703.140(b)(10)(A)
			100% of fair market value, up to any applicable statutory limit	
Travis Credit Union 8-086 Line from Schedule A/B: 17.2	\$5.00		\$5.00	CCCP § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Navy FCU 3-713 Line from Schedule A/B: 17.3	\$87.47		\$0.00	CCCP § 703.140(b)(10)(A)
			100% of fair market value, up to any applicable statutory limit	
Navy FCU 3-713 Line from Schedule A/B: 17.3	\$87.47		\$87.47	CCCP § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Navy FCU 3-101 Line from Schedule A/B: 17.4	\$30.09		\$0.00	CCCP § 703.140(b)(10)(A)
Ento noni donodalo A/D. 11.4			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	Navy FCU 3-101 Line from Schedule A/B 17.4	\$30.09	\$30.09 ■ \$30		CCCP § 703.140(b)(5)			
	Line from Schedule A/B. 11.4			100% of fair market value, up to any applicable statutory limit				
	Life Insurance Policy through	\$0.00			CCCP § 703.140(b)(8)			
	Physicians Life Insuarance Company Face Amount = \$10,000.00 Term Policy Line from Schedule A/B: 31.1		•	100% of fair market value, up to any applicable statutory limit				
3.	 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) No 							
	 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? □ No □ Yes 							

DocuSign Envelope ID: C4D18431-33A6-4297-9EFA-5A1CE377DAAE Case 10-22134 Filed 05/03/16 Doc 15

Fill in this infor				
Debtor 1	Janis Ann Broun	nley		
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	то			
Case number (if known)				☐ Check if this is ar amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

			O 430 1 0	, 22104	1 1104 00/00/10 200	10	
Fill in	this inform	ation to identify your o	ase:				
Debtor	r 1	Janis Ann Broum	lev				
		First Name	Middle Na	ime	Last Name		
Debto		E: AN					
(Spouse	if, filing)	First Name	Middle Na	me	Last Name		
United	l States Bar	kruptcy Court for the:	EASTERN D DIVISION	ISTRICT OF (CALIFORNIA, SACRAMENTO		
Case r	number						
(if knowr	n)			•			Check if this is an
							amended filing
Offic	ial Form	106E/F					
		/F: Creditors W	ho Have	Unsecur	ed Claims		12/15
					ORITY claims and Part 2 for creditors	with NONPRIORITY clair	
D: Cred the Con case nu	itors Who Ha itinuation Pa imber (if kno	ave Claims Secured by Pr ge to this page. If you hav wn).	operty. If more see no information	space is neede on to report in a	G). Do not include any creditors with d, copy the Part you need, fill it out, a Part, do not file that Part. On the top	number the entries in the	boxes on the left. Attach
Part 1		of Your PRIORITY Un					
	•	rs have priority unsecure	d claims against	you?			
	No. Go to Pa	art 2.					
	Yes.						
Part 2	List All	of Your NONPRIORIT	/ Unsecured C	laims			
3. Do	any credito	rs have nonpriority unsec	ured claims aga	inst you?			
	No. You hav	e nothing to report in this pa	art. Submit this fo	rm to the court	with your other schedules.		
	Yes.						
uns	secured claim	n, list the creditor separately	for each claim. F	For each claim li	of the creditor who holds each claim isted, identify what type of claim it is. Do you have more than three nonpriority un	o not list claims already inc	luded in Part 1. If more
							Total claim
4.1	Bank of	America		Last 4 digits of	f account number		\$5,000.00
	Nonpriority	Creditor's Name		When was the	debt incurred?	_	
	РО Вох	15019		whien was the	debt incurred?		-
		ton, DE 19886-5019	ı				
		reet City State ZIp Code		As of the date	you file, the claim is: Check all that a	oply	
	_	red the debt? Check one.					
	Debtor	1 only		☐ Contingent			
	☐ Debtor	2 only		☐ Unliquidated	d		
	☐ Debtor	1 and Debtor 2 only		☐ Disputed			
	At least	one of the debtors and and	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	• •	RIORITY unsecured claim:		
		if this claim is for a comm	nunity	☐ Student loan			
	debt	n subject to offset?		Obligations a	arising out of a separation agreement o	or divorce that you did not	
	No	ii subject to oliset?		,	y claims nsion or profit-sharing plans, and other	similar dehts	
				_		Similar uebis	
	☐ Yes			Other. Speci	ify		_

Debto	Broumley, Janis Ann	Case number (if know)					
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	\$16,000.00				
	Nonpriority Creditor's Name	When was the debt incurred?					
	PO Box 30253						
	Salt Lake City, UT 84130-0253	_					
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	ebtor 2 only Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	\square Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify					
4.3	HSBC Card Services	Last 4 digits of account number	\$500.00				
	Nonpriority Creditor's Name	Ψοσοίσο					
		When was the debt incurred?					
	PO Box 60102						
	City of Industry, CA 91716-0102 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
		_ `					
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt						
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify					
_							
4.4	Merrick Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00				
	Nonphonty Creditor's Name	When was the debt incurred?					
	PO Box 660702						
	Dallas, TX 75266-0702	_					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
		Student loans					
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify					
	_ 103	— Other, Specify					

Debto	Broumley, Janis Ann	Case number (if know)					
4.5	Sam's Club Nonpriority Creditor's Name	Last 4 digits of account number	\$200.00				
	PO Box 530942 Atlanta, GA 30353-0942	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify					
4.6	SYNCB/Walmart	Last 4 digits of account number	\$200.00				
	Nonpriority Creditor's Name	When was the debt incurred?					
	PO Box 530927						
	Atlanta, GA 30353-0927						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	Пол					
	_	☐ Contingent					
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated					
		☐ Disputed Type of NONPRIORITY unsecured claim:					
	At least one of the debtors and another	Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify					
4.7	Usaa Savings Bank	Last 4 digits of account number 3680	\$3,170.00				
	Nonpriority Creditor's Name		ψο,σ.σ				
	PO Box 47504	When was the debt incurred?					
	San Antonio, TX 78265-7504 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.	no of the date you me, the ordinate. One of an area apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	□ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify					

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Broumley, Janis Ann

Case number (if know)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Tatal Olaina
	6f.	Student loans	6f.	Total Claim
Tatal alaima	OI.	Student loans	OI.	\$ 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 26,070.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 26,070.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Janis Ann Broun	nley		
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	то			
Case number				
(if known)				☐ Check if this is a amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.3	Oity		Oldio	Zii Codo	
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	,				
	Name				
	Number	Street			
	City		State	ZIP Code	_

Official Form 106G

Fill in thi	s information to identify your	c350:		
Debtor 1	Janis Ann Brour	nley Middle Name	Last Name	
Debtor 2				
(Spouse if, f	First Name	Middle Name	Last Name	
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT OF DIVISION	CALIFORNIA, SACRA	MENTO
Cooo num	ahar			
Case nun				☐ Check if this is an amended filing
O#: -:-	J Farms 40011			
	al Form 106H	• .		
Sche	dule H: Your Cod	ebtors		12/15
and numb case num	per the entries in the boxes on ber (if known). Answer every by you have any codebtors? (If	the left. Attach the Addition question.	nal Page to this page.	re space is needed, copy the Additional Page, fill it out, On the top of any Additional Pages, write your name and a codebtor.
Califo	thin the last 8 years, have you ornia, Idaho, Louisiana, Nevada b. Go to line 3. es. Did your spouse, former spou No Yes.	, New Mexico, Puerto Rico, T	exas, Washington, and	? (Community property states and territories include Arizona, d Wisconsin.)
	In which community state	e or territory did you live?	-NONE-	. Fill in the name and current address of that person.
				<u> </u>
	Name of your spouse, former s			
line 2 106D	2 again as a codebtor only if the), Schedule E/F (Official Form mn 2.	ors. Do not include your sp nat person is a guarantor or	cosigner. Make sure	your spouse is filing with you. List the person shown in you have listed the creditor on Schedule D (Official Form e Schedule D, Schedule E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line
	Number Street City	State	ZIP Code	
3.2				Schedule D, line
	Name			☐ Schedule E/F, line ☐ Schedule G, line ☐
	Number Street City	State	ZIP Code	_

Official Form 106H Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com Schedule H: Your Codebtors

	in this information to identify you botor 1 Janis Anr	r case: n Broumley						
	otor 2 juse, if filing)				_			
Uni	ted States Bankruptcy Court for t	he: EASTERN DISTRICT SACRAMENTO DIVIS	*		_			
	se number 		-				d filing nt showing postpetition f the following date:	ı chapter 13
	fficial Form 106I					MM / DD/ Y	YYY	
S	chedule I: Your In	come						12/1
spo atta Par	plying correct information. If you use. If you are separated and you have separated to this form	our spouse is not filing wit n. On the top of any additio	h you, do not include	e inform	ation abo	ut your spous	se. If more space is n	eeded,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ■ Not employed			☐ Emplo	•	
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name						
	Occupation may include studer homemaker, if it applies.	nt or Employer's address				_		
		How long employed the	here?			_		
Par	t 2: Give Details About M	onthly Income						
	mate monthly income as of the ss you are separated.	date you file this form. If y	ou have nothing to repo	ort for an	y line, write	e \$0 in the spa	ce. Include your non-fi	ling spouse
•	u or your non-filing spouse have n ce, attach a separate sheet to this		bine the information for	all empl	oyers for th	nat person on t	the lines below. If you r	leed more
					For	Debtor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	0.00	\$	<u>. </u>
3.	Estimate and list monthly over	ertime pay.		3.	+\$	0.00	+\$ <u>N/A</u>	<u> </u>
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	0.00	\$N/A_	

Official Form 106I Schedule I: Your Income page 1

Debtor 1	Broumley, Janis Ann	_	Case r	number (if known)		
				Debtor 1	For Debtor	spouse
Co	ppy line 4 here	4.	\$_	0.00	\$	N/A
5. Li	st all payroll deductions:					
5a	. Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A
5b	. Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
50	. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
50	. Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
5e	. Insurance	5e.	\$	0.00	\$	N/A
5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
50	. Union dues	5g.	\$	0.00	\$	N/A
5h	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A
6. A	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A
7. C a	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A
8. Li 8a	st all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
8b	•	8b.	\$	0.00	\$	N/A
80			\$	0.00	\$	N/A
80		8d.	\$	0.00	\$	N/A
8e	Social Security	8e.	\$	1,382.00	\$	N/A
8f	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A
89	Pension or retirement income	— 8g.	\$	0.00	\$	N/A
8h	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A
9. A d	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,382.00	\$	N/A
	alculate monthly income. Add line 7 + line 9. Id the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	1	+\$_	N/A	= \$1,382.00
Ind otl Do	ate all other regular contributions to the expenses that you list in <i>Schedule</i> clude contributions from an unmarried partner, members of your household, your diner friends or relatives. In not include any amounts already included in lines 2-10 or amounts that are not avecify:	ependen		•		+\$0.00
	dd the amount in the last column of line 10 to the amount in line 11. The resrite that amount on the Summary of Schedules and Statistical Summary of Certain					\$ 1,382.00
13. D o	you expect an increase or decrease within the year after you file this form	?				Combined monthly income

Official Form 106I Schedule I: Your Income page 2

Filli	in this information to identify your case:				
Debt	tor 1 Janis Ann Broumley		Check	if this is:	
Dobt	tor 2		_	n amended filing	ing postpotition shorter 12
	buse, if filing)			supplement snow penses as of the f	ing postpetition chapter 13 following date:
Unite	ed States Bankruptcy Court for the: EASTERN DISTRICT C SACRAMENTO DIVISIO	*	M	M / DD / YYYY	
	e number nown)				
Of	fficial Form 106J				
Sc	chedule J: Your Expenses				12/15
info	as complete and accurate as possible. If two married pormation. If more space is needed, attach another sheeknown). Answer every question.				
Part	t 1: Describe Your Household Is this a joint case?				
	No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2,	Expenses for Separate House	eholdof Debtor 2		
2.	Do you have dependents?				
	Do not list Debtor 1 and Debtor 2. Fill out this inform each dependent.	•		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes
					□ No □ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include				☐ Yes
3.	expenses of people other than yourself and your dependents?				
Part					
exp	imate your expenses as of your bankruptcy filing date enses as of a date after the bankruptcy is filed. If this i olicable date.				
valu	lude expenses paid for with non-cash government assi ue of such assistance and have included it on <i>Schedul</i> ficial Form 106l.)			Your expe	enses
,011	notal Form root,				
4.	The rental or home ownership expenses for your respayments and any rent for the ground or lot.	idence. Include first mortgage	e 4. \$		730.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses	•	4c. \$		0.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, so 	ıch as home equity loans	4d. \$ 5. \$		0.00

Official Form 106J Schedule J: Your Expenses page 1

or 1 Broumley, Janis Ann	Case num	ber (if known)	
Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	0.00
6b. Water, sewer, garbage collection	6b.	\$	0.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	72.47
6d. Other. Specify:	6d.	\$	0.00
Food and housekeeping supplies	7.	\$	0.00
Childcare and children's education costs	8.	\$	0.00
Clothing, laundry, and dry cleaning	9.	\$	80.00
Personal care products and services	10.	\$	65.00
Medical and dental expenses	11.	\$	15.00
Transportation. Include gas, maintenance, bus or train fare.	40		105.00
Do not include car payments.			105.00
		·	200.00
•	14.	\$	0.00
, , ,	150	¢	4E CO
			45.62
		·	22.00
		·	127.59
· · · <u></u>	15d.	—	0.00
	10	¢	0.00
		———	0.00
• •	172	\$	0.00
• •		·	
, ,		·	0.00
		·	0.00
	170.	Ф	0.00
	18.	\$	0.00
			0.00
	19	<u> </u>	0.00
		r Income.	
			0.00
	20b.	\$	0.00
		·	0.00
		·	0.00
		·	0.00
			19.00
Auto Registration		Γ	19.00
Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	1,481.68
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,481.68
Only data was a small be mad because			
	00-	¢.	4 000 00
		·	1,382.00
23b. Copy your monthly expenses from line 22c above.	23b.	-\$	1,481.68
23c. Subtract your monthly expenses from your monthly income.			
		1	-99.68
	6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedula. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues Other: Specify: Auto Registration Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. Calculate your monthly net income.	6a. Electricity, heat, natural gas 6a. 6b. Water, sewer, garbage collection 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. 6d. Other. Specify: 6d. Food and housekeeping supplies 7. Childcare and children's education costs 8. Clothing, laundry, and dry cleaning 9. Personal care products and services 10. Medical and dental expenses 11. Transportation. Include gas, maintenance, bus or train fare. 12. Do not include car payments. 12. Entertainment, clubs, recreation, newspapers, magazines, and books 13. Charitable contributions and religious donations 13. Insurance. 15a. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. 15a. Life insurance 15a. 15d. Use insurance. Specify: 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Specify: 16c. Taxes. To not include taxes deducted from your pay or included in lines 4 or 20. 17c.<	Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. S 6d. Other. Specify: Food and housekeeping supplies 7r. \$ Collidicare and children's education costs 8. \$ Clothing, laundry, and dry cleaning 9. \$ Personal care products and services 10. \$ Medical and dental expenses 11. \$ Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. Other insurance. Specify: 15d. Other insurance. Specify: 17axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. \$ 17c. Other. Specify: 17d. Other specify: 17d. Oth

Official Form 106J Schedule J: Your Expenses page 2

Fill in this infor	mation to identify your	case:		
Debtor 1	Janis Ann Broun	,		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENT	O
Case number				
(if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Did	I you pay or agree to pay	omeone who is NOT an attorney to help you fill out bankruptcy forms?
	No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Und that X	— DeauCiamed Inc.	lare that I have read the summary and schedules filed with this declaration and X Signature of Debtor 2
	Signature of Debtor 1 3/29/2016 Date	Date

Bank of America PO Box 15019 Wilmington, DE 19886-5019

Capital One PO Box 30253 Salt Lake City, UT 84130-0253

HSBC Card Services PO Box 60102 City of Industry, CA 91716-0102

Merrick Bank PO Box 660702 Dallas, TX 75266-0702

Sam's Club PO Box 530942 Atlanta, GA 30353-0942

SYNCB/Walmart PO Box 530927 Atlanta, GA 30353-0927

Usaa Savings Bank PO Box 47504 San Antonio, TX 78265-7504

	l in this inform							
	i in this inform	nation to identify you	r case:					
De	btor 1	Janis Ann Brou	Middle Name		Last Name			
De	ebtor 2	i iist ivanie	Middle Name		Last Name	1		
1 -	ouse if, filing)	First Name	Middle Name		Last Name			
Un	iited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF DIVISION	CALIF	ORNIA, SACRAMEN [*]	го		
Ca	ise number							
	(nown)						_	neck if this is an nended filing
St	as complete a	of Financial	Affairs for Individual ble. If two married people an	e filing	together, both are e	qually responsible for		
(if k	(nown). Answ	er every question.	attach a separate sheet to t			additional pages, write	your n	ame and case numbe
Pa	rt 1: Give I	Details About Your M	arital Status and Where You	Lived E	Before			
1.	What is you	r current marital statu	ıs?					
	☐ Married							
	■ Not ma							
2.	During the I	ast 3 years have you	lived anywhere other than v	where v	ou live now?			
	_	ust o years, nave yea	invoca unity where other than t	which c y	od 1170 110W.			
	■ No □ Yes. Lis	st all of the places you li	ved in the last 3 years. Do not	include	where you live now.			
	Debtor 1 Pr	ior Address:	Dates Debtor 1 there	lived	Debtor 2 Prior Ad	dress:		Dates Debtor 2 lived there
3. stat			ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev					
	■ No □ Yes. Ma	ake sure you fill out <i>Sch</i>	edule H: Your Codebtors (Off	icial For	m 106H).			
Pa	rt 2 Explai	in the Sources of You	r Income					
4.	Fill in the tota If you are filin	al amount of income yo	nployment or from operating the received from all jobs and a mave income that you receive to	all busin	esses, including part-	time activities.	calenda	ir years?
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.	(befo	ss income ore deductions and usions)	Sources of income Check all that apply.		Gross income (before deductions and exclusions)

Official Form 107

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
7	Within 1 year before you filed for hankrunto	v did vou make a navmer	nt on a debt you owe	ed anyone who w	as an insider?	

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider

Insider's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an

Official Form 107

De	DIOI I Broumley, Janis Ann		Casi	e number (if known)		
	insider? Include payments on debts guaranteed or cosiç	gned by an insider.				
	■ No □ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment tor's name
Pa	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures	•			
9.	Within 1 year before you filed for bankruptor List all such matters, including personal injury of and contract disputes.					
	■ No □ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below		rty repossessed, for	reclosed, garnishe	d, attached, s	eized, or levied?
	No Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment became No Yes. Fill in the details.		uding a bank or fina	ncial institution, se	et off any amo	ounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a	ction was	Amoun
12.	Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a		rty in the possessio		or the benefit	of creditors, a
	■ No □ Yes					
Pa	rt 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any gifts	with a total value o	f more than \$600 p	er person?	
	Gifts with a total value of more than \$600 person	per Describe the gifts		Dates the gif	you gave ts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or cont		or contributions wi	ith a total value of	more than \$6	00 to any charity
	Gifts or contributions to charities that totamore than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		contributed	Dates contrib		Valu
Pa	rt 6: List Certain Losses					
_						

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

Del	otor 1	Broumley, Janis Ann			case number	if known)	
	or gan	nbling?					
	■ N						
	_	es. Fill in the details.					
		ribe the property you lost and he loss occurred	Include	be any insurance coverage for the lost the amount that insurance has paid. Lince claims on line 33 of Schedule A/B: P	ist pending	Date of your loss	Value of property lost
Par	t 7:	List Certain Payments or Transfers			. openy.		
rai		List Certain Fayments of Transiers	•				
16.	consu	Ited about seeking bankruptcy or p	reparing	I you or anyone else acting on your by a bankruptcy petition? or credit counseling agencies for service		, , ,	y to anyone you
	□ м						
	■ Y	es. Fill in the details.					
	Perso	on Who Was Paid		Description and value of any prope	erty	Date payment or	Amount of
		ess For website address on Who Made the Payment, if Not Y	ou	transferred		transfer was made	payment
		ruptcy Law Group, PC		Attorney: \$1,500			\$1,935.00
		Heritage Ln Ste 298 amento, CA 95815-4923		Court Fee: \$335 Costs (credit report & education	on		
		sti Nilsen		courses): \$100	OII		
17.	promis Do not	sed to help you deal with your cred include any payment or transfer that y	litors or	I you or anyone else acting on your k to make payments to your creditors? on line 16.		transfer any propert	y to anyone who
	Perso Addre	on Who Was Paid ess		Description and value of any prope transferred	erty	Date payment or transfer was made	Amount of payment
18.	Include gifts ar	erred in the ordinary course of you e both outright transfers and transfers and transfers that you have already liste	r busine made as	security (such as the granting of a secu			
	Perso	on Who Received Transfer		Description and value of		any property or	Date transfer was
	Addre	ess		property transferred	payments paid in ex	received or debts	made
	Perso	on's relationship to you			para m ox	onango	
19.	benefi N	ciary? (These are often called asset-		did you transfer any property to a sel n devices.)	lf-settled trus	st or similar device of	which you are a
	Name	e of trust		Description and value of the proper	rty transferre	ed	Date Transfer was
							made

- controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and Environmental law, if you know it

Date of notice

Official Form 107

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No
□ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

Fill in this info	ormation to identify your case:		Che	eck one box	only as d	irected in this form and	l in Form
Debtor 1	Janis Ann Broumley		122	2A-1Supp:			
Debtor 2				■ 1. There is	s no pres	umption of abuse	
(Spouse, if filing)				☐ 2 The cal	culation t	o determine if a presur	notion of abuse
United States	Eastern District of Sacramento Division	·	_ '	applies	will be n	nade under <i>Chapter 7 N</i> cial Form 122A-2).	•
Case number	r		_			does not apply now becout it could apply later.	ause of qualified
				☐ Check if	this is a	an amended filing	
	Form 122A - 1						
Chapte	r 7 Statement of Your Cu	rrent Mon	thly Inc	ome			12/1
a separate she number (if kno military service	e and accurate as possible. If two married people et to this form. Include the line number to which twn). If you believe that you are exempted from a performation of the example of the example of the example of Exemption from Calculate Your Current Monthly Income	he additional inforn presumption of abuse	nation applies. se because you	On the top of do not have	any addit primarily	ional pages, write your r consumer debts or beca	name and case nuse of qualifying
1. What is	your marital and filing status? Check one or	nly.					
■ Not i	married. Fill out Column A, lines 2-11.						
☐ Marr	ried and your spouse is filing with you. Fill o	ut both Columns A	and B, lines 2	2-11.			
☐ Marr	ied and your spouse is NOT filing with you.	You and your sp	ouse are:				
□ Li	ving in the same household and are not lega	ally separated. Fill	out both Colu	mns A and B	, lines 2-	11.	
p	ving separately or are legally separated. Fill enalty of perjury that you and your spouse are lepart for reasons that do not include evading the	gally separated und	der nonbankrup	otcy law that a	applies or		
101(10A). F 6 months, a	verage monthly income that you received from all or example, if you are filing on September 15, the 6-r dd the income for all 6 months and divide the total by ne rental property, put the income from that property	nonth period would b 6. Fill in the result. D	e March 1 throu o not include an	gh August 31. ny income amo	If the amo unt more t	unt of your monthly incom	e varied during the
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	ross wages, salary, tips, bonuses, overtime, leductions).	and commissions	s (before all	\$	0.00	\$	
	y and maintenance payments. Do not include B is filled in.	payments from a	spouse if	\$	0.00	\$	
of you of from an roomma	ounts from any source which are regularly party our dependents, including child support unmarried partner, members of your household, ates. Include regular contributions from a spous notice payments you listed on line 3	 Include regular co your dependents, 	ontributions parents, and	\$	0.00	\$	
5. Net inco	ome from operating a business, profession,						
0		\$ 0.00	or 1				
	eceipts (before all deductions) y and necessary operating expenses	-\$ 0.00					
-	y and necessary operating expenses othly income from a business, profession, or fa		Copy here ->	\$	0.00	\$	
	ome from rental and other real property	φ		*		*	
	and cline to the property	Debt	or 1				
Gross re	eceipts (before all deductions)	\$ 0.00					
Ordinary	and necessary operating expenses	-\$ 0.00					
Net mor	nthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
7. Interest	. dividends. and rovalties			\$	0.00	\$	

Official Form 122A-1

7. Interest, dividends, and royalties

Broumley, Janis Ann Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit 0.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 0.00 0.00 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 0.00 Multiply by 12 (the number of months in a year) **x** 12 0.00 12b. The result is your annual income for this part of the form 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. CA Fill in the number of people in your household. 50.519.00 Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clebs office. 14. How do the lines compare? 14a Line 12b is less than or equal to line 13. On the top of page 1, check box 17, here is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below B١ er penalty of perjury that the information on this statement and in any attachments is true and correct. Jahus Brownley Date MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2.

Official Form 122A-1

If you checked line 14b, fill out Form 122A-2 and file it with this form.

btor 1	Ionic Ann Bran	mlov		
וטוטו ו	Janis Ann Brou First Name	Middle Name	Last Name	
btor 2				
ouse if, filing)	First Name	Middle Name	Last Name	
ited States Ba	ankruptcy Court for the:		CT OF CALIFORNIA, SACRAMENTO	
se number				
(nown)				☐ Check if this is an amended filing
	orm 108			_
ateme	nt of Intenti	on for Indivi	duals Filing Under Chapte	er 7 12/1
ou are an ind	lividual filing under ch	apter 7, you must fill ou	ut this form if	
	e claims secured by y			
		and the lease has not e	expired.	
u must file th	is form with the court	within 30 days after you	u file your bankruptcy petition or by the date set f	
which	ever is earlier, unless t		me for cause. You must also send copies to the co	
the for	rm			
vo married p	eople are filing togethe	er in a joint case, both a	are equally responsible for supplying correct infor	mation. Both debtors must s
and da	ate the form.	-		
	210 1110 1011111			
as complete		hla If more enace is no	adad attach a canarata chaot to this form. On the	ton of any additional nages
	and accurate as possil		eded, attach a separate sheet to this form. On the	top of any additional pages,
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write y	and accurate as possil our name and case nu	umber (if known).	· · · · · · · · · · · · · · · · · · ·	
write y	and accurate as possil our name and case nu our Creditors Who Ha tors that you listed in F	umber (if known).	reditors Who Have Claims Secured by Property (C	
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Statement of Intention for Individuals Filing Under Chapter 7

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Official Form 108

page 1

Debtor 1 Broumley, Janis Ann	Case number (if known)	
name: Description of property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Unexpi may assume an unexpired personal property lease if the tru	red leases are leases that are still in effect; the lease	eases (Official Form 106G), fill in e period has not yet ended. You
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Under penalty of periury I declare that I have indicated my proper DocuSigned by: expired lease. X		res a debt and any personal
Signature of Debtor 1 Date 0920692267C3489. Broumiey Signature of Debtor 1	Signature of Debtor 2 Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California, Sacramento Division

In r	re Broumley, Janis Ann		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF CO	OMPENSATION OF ATTORN	EY FOR D	DEBTOR	
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. compensation paid to me within one year before be rendered on behalf of the debtor(s) in contemp.	the filing of the petition in bankruptcy, or a	greed to be paid	d to me, for service	
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have re-		\$	1,500.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclose firm.	ed compensation with any other person unles	ss they are men	nbers and associate	es of my law
	☐ I have agreed to share the above-disclosed co- copy of the agreement, together with a list of				ny law firm. A
5.	In return for the above-disclosed fee, I have agree	eed to render legal service for all aspects of t	the bankruptcy	case, including:	
	a. Analysis of the debtor's financial situation, anb. Preparation and filing of any petition, schedulc. Representation of the debtor at the meeting ofd. [Other provisions as needed]	iles, statement of affairs and plan which may	be required;	-	ankruptcy;
6.	By agreement with the debtor(s), the above-disclement work such as Motions to compare the suc	compel and motions to redeem or rea		earings	
		CERTIFICATION	0		
	I certify that the foregoing is a complete statement bankruptcy proceeding. 3/29/2016	ent of any agreement or arrangement for pays Paul Bailus	ment to me for	representation of the	ne debtor(s) in
Ī	Date	Pauldeep Bains Signature of Attorney Bankruptcy Law Grou	ıp, PC		
		1851 Heritage Ln Ste 2 Sacramento, CA 95819 (707) 422-8500 Fax: (in paulb@bankruptcylg.one) Name of law firm	5-4923 888) 843-726	0	

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UNITED STATES BANKRUPTCY COURT Eastern District of California, Sacramento Division

In re Dean, James Christopher Dean, Donna Jeanne)))	Case No
Del	otor(s).)))	

VERIFICATION OF MASTER ADDRESS LIST

I (we) declare under penalty of perjury that the Master Address List submitted for filing in this case is a true, correct, and complete listing.

I (we) acknowledge that the accuracy and completeness of the Master Address List is the shared responsibility of the debtor(s) and the debtor's(s') attorney or bankruptcy petition preparer, if any.

I (we) further acknowledge that the Court will rely on the Master Address List for all mailings, and that the various schedules and statements required by the Bankruptcy Code and the Federal Rules of Bankruptcy Procedure will not be used for mailing purposes.

DATED:	3/31/2016	James Dean
DITTED.		Dentor's Signature
DATED:	3/31/2016	Donna Dean
_		Joint Deptor's (ii any) Signature

Submit this form and your Master Address List to one of the following addresses:

Sacramento Division 501 I Street, Suite 3-200 Sacramento, CA 95814

Modesto Division

Mailing Address:
501 I Street, Suite 3-200
Sacramento, CA 95814

Fresno Division 2500 Tulare Street, Suite 2501 Fresno, CA 93721

Physical Address: 1200 I Street, Suite 4 Modesto, CA 95354

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION	
Case number (if known):	

Official Form 121

Statement About Your Social Security Numbers

12/15

Use this form to tell the court about any Social Security or federal Individual Taxpayer Identification numbers you have used. Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.

To protect your privacy, the court will not make this form available to the public. You should not include a full Social Security Number or Individual Taxpayer Number on any other document filed with the court. The court will make only the last four digits of your numbers known to the public. However, the full numbers will be available to your creditors, the U.S. Trustee or bankruptcy administrator, and the trustee assigned to your case.

		For Debtor 1:	For Debtor 2 (Only if Spouse is Filing:)
	Your name	James	Donna
		First name	First name
		Christopher	Jeanne
		Middle name	Middle name
		Dean	Dean
		Last name	Last name
	All Social Security		
	Numbers you have used	-2816	-7952
		☐ You do not have a Social Security Number	☐ You do not have a Social Security Number
	All federal Individual Taxpayer Identification Numbers (ITIN) you		
	have used	You do not have an ITIN.	You do not have an ITIN.
ar	t 3: Sign Below		
		Under penalty of periury I declare that the information I is true and correct. X James Christopher Dean	Under penalty of periury. I declare that the information have procusigned by: I and correct. X Donna Jeanne Dean
		Signature of Debtor 1 3/31/2016	Signature of Debtor 2 3/31/2016

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Par	Part 1: Identify Yourself							
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):					
1.	Your full name							
	Write the name that is on your government-issued picture identification (for	James First name	Donna First name					
	example, your driver's	Christopher	Jeanne					
	license or passport).	Middle name	Middle name					
Bring your picture identification to your meeting		Dean Last name and Suffix (Sr., Jr., II, III)	Dean Last name and Suffix (Sr., Jr., II, III)					
2.	All other names you have used in the last 8 years Include your married or maiden names.	James C Dean James Dean	Donna Dean Donna J Dean					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2816	xxx-xx-7952					

Debtor 1 Debtor 2

Dean, James Christopher & Dean, Donna Jeanne

Case number (if known)

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
		I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s) EINs		
5. Where you live		75 Calle Chapala Vacaville, CA 95687-6518 Number, Street, City, State & ZIP Code	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code		
		Solano County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code		
6. Why you are choosing this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) My residence and principal assets have been located in this District.		

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	otor 1 otor 2 Dean, James Chri	stopher & Dea	n, Donna Jeanne	(Case number (if known)				
	Tell the Court About Y	· · ·							
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under	■ Chapter 7							
		☐ Chapter 11							
		☐ Chapter 12							
		☐ Chapter 13							
8.	How you will pay the fee	about how If your atto pre-printed	you may pay. Typically, if you are p rney is submitting your payment on I address.	paying the fee yourse n your behalf, your at	with the clerk's office in your local court for melf, you may pay with cash, cashier's check, torney may pay with a credit card or check w	or money order. vith a			
			pay the fee in installments. If you in Installments (Official Form 103A		sign and attach the Application for Individua	ls to Pay The			
		not require your family	ed to, waive your fee, and may do so	o only if your income e fee in installments).	nly if you are filing for Chapter 7. By law, a ju is less than 150% of the official poverty line. If you choose this option, you must fill out the nd file it with your petition.	that applies to			
9.	Have you filed for	■ No.							
	bankruptcy within the last 8 years?	☐ Yes.							
		Distri	ct	When	Case number				
		Distri	ct	When	Case number				
		Distri	ct	When	Case number				
10.	Are any bankruptcy cases pending or being filed by	■ No							
	a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.							
		Debte	or		Relationship to you				
		Distri	ct	When	Case number, if known				
		Debte			Relationship to you				
		Distri	ct	When	Case number, if known				
11.	Do you rent your residence?	■ No. Go	to line 12.						
	. Jointino .	☐ Yes. Has	your landlord obtained an eviction	judgment against yo	ou and do you want to stay in your residence?	?			
			No. Go to line 12.						
			Yes. Fill out <i>Initial Statement A</i> bankruptcy petition.	bout an Eviction Jud	dgment Against You (Form 101A) and file it	with this			

	tor 1 tor 2 Dean, James Chri	stopher	& Dean,	Donna Jeanne	Case number (if known)		
Par	t 3: Report About Any Bus	sinesses \	∕ou Own a	as a Sole Proprieto	etor		
12. Are you a sole proprietor of any full- or part-time business? Go to Part 4.							
		☐ Yes.	Name	and location of bus	usiness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.	Name of business, if any nd is not a al entity such as					
	If you have more than one sole proprietorship, use a		Numbe	er, Street, City, Stat	ate & ZIP Code		
	separate sheet and attach it to this petition.		Check	the appropriate box	ox to describe your business:		
				Health Care Busin	iness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	al Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	defined in 11 U.S.C. § 101(53A))		
				Commodity Broker	ter (as defined in 11 U.S.C. § 101(6))		
				None of the above	ve		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	rou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate addines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am n	ot filing under Chap	apter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ing under Chapter	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am fi	ing under Chapter	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	Hazardou	s Property or Any	ny Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of	☐ Yes.					
	imminent and identifiable hazard to public health or		What is t	he hazard?			
	safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code		
					, 1414, 1411		

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Debtor 1 Debtor 2

Dean, James Christopher & Dean, Donna Jeanne

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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ocu	Sign Envelope ID: 6926FCFE	D-9208-4E	7C-95B4-F9502A4FAZ57 Case 16-22134 Fi	led 05/03/16 Do	oc 15			
	otor 1 Dean, James Chri	stopher	& Dean, Donna Jeanne	C	Case number (if kno	own)		
ar	t 6: Answer These Question	ons for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	6a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred individual primarily for a personal, family, or household purpose."					
	you navo.		□ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily busines for a business or investment or through	s debts? Business debts ugh the operation of the bu	are debts that you	u incurred to obtain money nent.		
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe that	are not consumer debts of	r business debts			
17.	Are you filing under Chapter 7?							
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expepaid that funds will be available to distribute to unsecured creditors?					
	administrative expenses are paid that funds will be		■ No					
	available for distribution to unsecured creditors?		Yes					
18.	How many Creditors do you estimate that you owe?	1-49 50-99 100-1	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
		200-9						
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 mill □ \$10,000,001 - \$50 m □ \$50,000,001 - \$100 m □ \$100,000,001 - \$500	nillion nillion	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	\$100 ,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 mill □ \$10,000,001 - \$50 m □ \$50,000,001 - \$100 m □ \$100,000,001 - \$500	nillion nillion	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion		
ar	t7: Sign Below							
or	you	I have exa	amined this petition, and I declare und	der penalty of perjury that the	he information pro	ovided is true and correct.		
-			chosen to file under Chapter 7, I amode. I understand the relief available u			r Chapter 7, 11,12, or 13 of title 11, Unite I under Chapter 7.		
			rney represents me and I did not pay on the inner and read the notice required by	0 1 7	ho is not an attor	ney to help me fill out this document, I		
		I request	relief in accordance with the chapte	r of title 11, United States	Code, specified	in this petition.		
		DoouGie	and ha					

I request relief	in accordance with the ch	apter of title 11, United State	s Code, spe	ecified in this petition.
James De	a false statement, co		cuSigned by: Wa DU	Intry by fraud in connection with a bankruptcy J.S.C. §§ 152, 1341, 1519, and 3571.
James Chri Signature of D	stopner Dean		3561A7AD3345E ture of Debte	
Executed on	3/31/2016	Execu	ited on 3	/31/2016
	MM / DD / YYYY		1/1	M / DD / YYYY

page 6

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Debtor 1 Debtor 2 Dean, James Chr	ristopher & Dean, Donna Jeanne	Cas	e number (if known)
For your attorney, if you are represented by	Chapter 7, 11, 12, or 13 of title 11, United State person is eligible. I also certify that I have delivered to the control of	es Code, and have explained vered to the debtor(s) the notion	ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the ce required by 11 U.S.C. § 342(b) and, in a case in ry that the information in the schedules filed with the
If you are not represented by an attorney, you do not need to file this page.	Paul Bailus	e no knowledge arter an inqui	3/31/2016
	Pauldeep Bains		MM / DD / YYYY
	Printed name Bankruptcy Law Group, PC Firm name		
	1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923		
	Number, Street, City, State & ZIP Code Contact phone (707) 422-8500	Email address	paulb@bankruptcylg.com
	268004 Bar number & State		<u> </u>

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Certificate Number: 17572-CAC-CC-027208530



CERTIFICATE OF COUNSELING

I CERTIFY that on March 31, 2016, at 1:39 o'clock PM PDT, James Christopher Dean received from Dollar Learning Foundation, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Central District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date:	March 31, 2016	By:	/s/Selin Polat

Name: Selin Polat

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Certificate Number: 17572-CAC-CC-027208915



CERTIFICATE OF COUNSELING

I CERTIFY that on March 31, 2016, at 2:32 o'clock PM PDT, Donna Dean received from Dollar Learning Foundation, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Central District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 31, 2016 By: /s/Arman Polat

Name: Arman Polat

Title: Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill in this inform	mation to identify your	case:		
Debtor 1	James Christoph	er Dean		
	First Name	Middle Name	Last Name)
Debtor 2	Donna Jeanne De	ean		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMEN	то
Case number				
(if known)				☐ Check if thi amended fi

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	3,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	74,936.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	77,936.00
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	82,299.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	29,452.00
	Your total liabilities	\$	111,751.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	3,906.75
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,431.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	ner schedi	ules.
	■ Yes		

- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debit	Douin, ouin	s Christopher & Dean, Donna		
Debto	or 2 Jeanne	Case number (if known)		
		e not primarily consumer debts. You have nothing to report on this part of the form. Check this box other schedules.	x and submit this form to th	е
		t of Your Current Monthly Income: Copy your total current monthly income from Official Form Form 122B Line 11: OR . Form 122C-1 Line 14.	\$ 4,411.29)

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Book A on Oak a hala E/E assess the fall scale of	Total cl	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	rmation to identify your case and tl	his filing:			
Debtor 1	James Christopher Dean				
Debtor 2 (Spouse, if filing)	Donna Jeanne Dean	dle Name Last Name			
United States E	Bankruptcy Court for the: EASTERN	N DISTRICT OF CALIFORNIA, SACRAMENTO D	IVISION		
Case number					Check if this is an
Case Humber					amended filing
Schedu In each category, think it fits best.	Be as complete and accurate as possibore space is needed, attach a separate s	t an asset only once. If an asset fits in more than on ole. If two married people are filing together, both are sheet to this form. On the top of any additional pages	equally responsible	e for supplyi	ing correct
Part 1: Describ	oe Each Residence, Building, Land, or O	Other Real Estate You Own or Have an Interest In			
No. Go to P					
Yes. Where	e is the property?	What is the property? Check all that apply Single-family home Duplex or multi-unit building	the amount of an	y secured cla	s or exemptions. Put aims on <i>Schedule D:</i> Secured by Property.
Yes. Where	e is the property?	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property	the amount of an Creditors Who H Current value or entire property?	ny secured cla lave Claims S f the C	aims on <i>Schedule D:</i>
Yes. Where	e is the property?	□ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home ■ Land □ Investment property □ Timeshare □ Other ■ Who has an interest in the property? Check one □ Debtor 1 only	Current value or entire property? \$3,00 Describe the na	f the C D D D O O O O O O O O O O O O O O O O	aims on Schedule D: Secured by Property.
Yes. Where	e is the property?	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one	the amount of an Creditors Who H Current value of entire property? \$3,00 Describe the nation (such as fee sin a life estate), if I	f the CP p 00.00 ture of your nple, tenancy known.	aims on Schedule D: Secured by Property. Gurrent value of the ortion you own? \$3,000.00 ownership interest

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

you have attached for Part 1. Write that number here.....=>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Debt	Doon James Christer	oher & Dean, Donna Jeanne	ase number (if known)	
3. Ca	irs, vans, trucks, tractors, sport ι	utility vehicles, motorcycles		
	No			
_	Yes			
_	165			
3.1	Make: Ford	Who has an interest in the property? Check one		claims or exemptions. Put
0	Model: Focus	Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year: 2014	Debtor 2 only		, , ,
	Approximate mileage:	20000 Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	☐ At least one of the debtors and another		
		Check if this is community property (see instructions)	\$9,658.00	\$9,658.00
	-		Do not dodust appured	olaima or evemptions. Dut
3.2	Make: Dodge	Who has an interest in the property? Check one	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i>
	Model: Caliber	Debtor 1 only	Creditors Who Have Cla	aims Secured by Property.
	Year: 2007	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 10 Other information:	Debtor 1 and Debtor 2 only At least one of the debtors and another	entire property?	portion you own?
	Other information.	At least one of the deptors and another		
		☐ Check if this is community property	\$2,541.00	\$2,541.00
		(see instructions)		
	Model: Expression Year: 2008 Other information: Mobile Home (Residence) 15 x 56	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Current value of the entire property? \$53,000.00	aims Secured by Property. Current value of the portion you own? \$53,000.00
	-	you own for all of your entries from Part 2, including any that number here		\$65,199.00
Part 3	3: Describe Your Personal and Hou	sehold Items		
Do y	ou own or have any legal or equi	itable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	busehold goods and furnishings xamples: Major appliances, furniture No	e, linens, china, kitchenware		
	Yes. Describe			
	Househ	old Goods		\$2,000.00
E		dio, video, stereo, and digital equipment; computers, printers, s meras, media players, games	scanners; music collections	;; electronic devices
		Cahadida A/D. Dear-ati		
111111111111111111111111111111111111111	al Form 106A/B	Schedule A/B: Property		page

Official Form 106A/B
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	ebtor 1 ebtor 2	Dean	, Jame	s Christopher & Dean, Donna Jeanne Case number (if known)	
				Electronics	\$600.00
	Collectib Example ■ No □ Yes.	es: Antiq colle	ues and ctions, r	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or be nemorabilia, collectibles	paseball card collections; other
		es: Sport instr	s, photo uments	nd hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and l	kayaks; carpentry tools; musical
	Firearm Examp □ No ■ Yes.	oles: Pist		s, shotguns, ammunition, and related equipment	
	— 165.	Describ	с	.22 Rifle (Marlin)	\$75.00
	Clothes Examp □ No ■ Yes.	oles: Eve		othes, furs, leather coats, designer wear, shoes, accessories	
				Clothes	\$3,000.00
13.	■ No □ Yes. Non-far	Describ manim oles: Dog	e als s, cats,	velry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, s birds, horses	
				3 Cats	\$100.00
	■ No			d household items you did not already list, including any health aids you did not list	
15				of all of your entries from Part 3, including any entries for pages you have attached for nber here	\$5,775.00
Pa	rt 4: Des	scribe Yo	our Finan	cial Assets	
Do	you ow	n or ha	ve any I	egal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No			nave in your wallet, in your home, in a safe deposit box, and on hand when you file your petition	
	eres			Cash on Hand	\$27.00

	ebtor 1 ebtor 2 Dean, James Chr	istopher & Dean, Donna	a Jeanne Case number (if known)	
17.			ertificates of deposit; shares in credit unions, brokerage houses, and ot the same institution, list each.	her similar
	Yes		Institution name:	
	17.	1. Checking Account	Travis Credit Union 818(00)	\$6.00
	17.	2. Savings Account	Travis Credit Union 818(06) Christmas Acct	\$6.00
	17.	3. Checking Account	Travis Credit Union 818(50)	\$10.00
_	17.	4. Checking Account	Travis Credit Union 260(00)	\$1,800.00
	17.	5. Savings Account	Travis Credit Union 000	\$1,018.00
	■ No □ Yes Non-publicly traded stock an joint venture ■ No □ Yes. Give specific information Government and corporate be Negotiable instruments included Non-negotiable instruments are ■ No □ Yes. Give specific information	Institution or issuer name d interests in incorporated on about them Name of entity: conds and other negotiable e personal checks, cashiers' of e those you cannot transfer to	e firms, money market accounts : and unincorporated businesses, including an interest in an LLC, % of ownership: and non-negotiable instruments checks, promissory notes, and money orders. It is someone by signing or delivering them.	partnership, and
	■ No □ Yes. List each account separate	RISA, Keogh, 401(k), 403(b), ately.	thrift savings accounts, or other pension or profit-sharing plans	
22.	Security deposits and prepay Your share of all unused depose Examples: Agreements with land	sits you have made so that you	Institution name: u may continue service or use from a company utilities (electric, gas, water), telecommunications companies, or others	
	■ No □ Yes		Institution name or individual:	
	■ No	iodic payment of money to you ame and description.	u, either for life or for a number of years)	
24.	26 U.S.C. §§ 530(b)(1), 529A(b)		d ABLE program, or under a qualified state tuition program.	
	■ No □ Yes Institution	n name and description. Sepa	arately file the records of any interests.11 U.S.C. § 521(c):	

☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

■ No

☐ Yes. Describe each claim.......

Debi	Doon James Christenher 9 Doon Donne Joon	ne	Case number (if known)	
34. C	ther contingent and unliquidated claims of every nature, inclu	ding counterclaims of	the debtor and rights to se	t off claims
	No Yes. Describe each claim			
	ny financial assets you did not already list			
	No Voc Civo appoiris information			
	Yes. Give specific information		_	
36.	Add the dollar value of all of your entries from Part 4, includin Part 4. Write that number here			\$3,962.00
Part	Describe Any Business-Related Property You Own or Have an Inte	rest In. List any real esta	te in Part 1.	
37. D	o you own or have any legal or equitable interest in any business-relat	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	t In.	
46. C	o you own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
	o you have other property of any kind you did not already list	?		
_	No No			
_	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write the	at number here		\$0.00
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$3,000.00
56.	Part 2: Total vehicles, line 5	\$65,199.00		
57.	Part 4: Total personal and household items, line 15	\$5,775.00		
58. 59.	Part 4: Total financial assets, line 36 Part 5: Total business-related property, line 45	\$3,962.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00 \$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
			Copy porconal property total	d
62.	Total personal property. Add lines 56 through 61	\$74,936.00	Copy personal property tota	al \$74,936.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$77,936.00
			<u> </u>	

Vehicle Appraisal

Page 1 of 1



DATE: 3/30/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

VEHICLE INFORMATION:

YEAR: 2014 CONDITION: Average

MAKE: Ford **MILEAGE: 20000**

ZIP CODE: 95687 MODEL: Focus

STYLE: SE 4dr Hatchback (2.0L 4cyl

OPTIONS:

RETAIL

TRADE IN

PRIVATE PARTY

Edmunds.com TMV® \$10,775.00

\$8,324.00

\$9,658.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any options. (If no Zip Code was provided, this price is the national price.)

DATA PROVIDED BY



Vehicle Appraisal

Page 1 of 1



DATE: 3/30/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

VEHICLE INFORMATION:

YEAR: 2007 CONDITION: Average

MAKE: Dodge **MILEAGE: 109000**

ZIP CODE: 95687 MODEL: Caliber

STYLE: SXT 4dr Wagon (1.8L 4cyl 5M)

OPTIONS:

RETAIL

TRADE IN

PRIVATE PARTY

Edmunds.com TMV®

\$3,562.00

\$1,810.00

\$2,541.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any options. (If no Zip Code was provided, this price is the national price.)

DATA PROVIDED BY



Debtor 1	James Christoph	er Dean		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF DIVISION	F CALIFORNIA, SACRAMENTO	
Case number f known)				☐ Check if this is ar amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	It 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming?	Check one only, even	if you	r spouse is filing with you.	
	■ You are claiming state and federal nonbankr	uptcy exemptions. 11 l	J.S.C.	. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 U.	S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exer	npt, fi	II in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
De	ebtor 1 Exemptions				
	Line from Schedule A/B 1.1			\$3,000.00	CCCP § 703.140(b)(5)
	Line non donedate /VZ 111			100% of fair market value, up to any applicable statutory limit	
	Ford Focus	\$9,658.00		\$0.00	CCCP § 703.140(b)(2)
	2014 20000 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Ford Focus	\$9,658.00		\$0.00	CCCP § 703.140(b)(5)
	2014 20000 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	Ford Focus	\$9,658.00		\$0.00	CCCP § 703.140(b)(5)
	2014 20000 Line from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit	

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim ck only one box for each exemption.	Specific laws that allow exemption
Dodge	\$2,541.00		\$0.00	CCCP § 703.140(b)(5)
Caliber 2007 109000 Line from <i>Schedule A/B</i> : 3.2			100% of fair market value, up to any applicable statutory limit	
Fleetwood Expression	\$53,000.00		\$2,117.00	CCCP § 703.140(b)(5)
2008 Line from Schedule A/B: 4.1			100% of fair market value, up to any applicable statutory limit	
Household Goods Line from Schedule A/B. 6.1	\$2,000.00		\$2,000.00	CCCP § 703.140(b)(3)
			100% of fair market value, up to any applicable statutory limit	
Electronics Line from Schedule A/B 7.1	\$600.00	•	\$600.00	CCCP § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
.22 Rifle (Marlin) Line from Schedule A/B 10.1	\$75.00		\$75.00	CCCP § 703.140(b)(3)
			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$3,000.00		\$3,000.00	CCCP § 703.140(b)(3)
			100% of fair market value, up to any applicable statutory limit	
3 Cats Line from Schedule A/B: 13.1	\$100.00		\$100.00	CCCP § 703.140(b)(3)
			100% of fair market value, up to any applicable statutory limit	
Cash on Hand Line from Schedule A/B 16.1	\$27.00		\$27.00	CCCP § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Travis Credit Union 818(00) Line from Schedule A/B: 17.1	\$6.00		\$6.00	CCCP § 703.140(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Travis Credit Union 818(06) Christmas Acct	\$6.00		\$6.00	CCCP § 703.140(b)(5)
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Travis Credit Union 818(50) Line from Schedule A/B: 17.3	\$10.00		\$10.00	CCCP § 703.140(b)(5)
Ento Hom Gonedate AVE. The			100% of fair market value, up to any applicable statutory limit	

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Travis Credit Union 260(00) Line from Schedule A/B 17.4	\$1,800.00		\$450.00	CCCP § 703.140(b)(5)
Line from Scheaule A/B. 17.4			100% of fair market value, up to any applicable statutory limit	
Travis Credit Union 260(00) Line from Schedule A/B 17.4	\$1,800.00		\$1,350.00	CCCP § 703.140(b)(5)
Line nom Schedule A/L 17.4			100% of fair market value, up to any applicable statutory limit	
Travis Credit Union 000 Line from Schedule A/B 17.5	\$1,018.00		\$1,018.00	CCCP § 703.140(b)(5)
Line nom Schedule A/B. 17.3			100% of fair market value, up to any applicable statutory limit	
Whole Life Policy through AAA Policy975	\$1,095.00		\$1,095.00	CCCP § 703.140(b)(8)
\$15,000 Death Benefit Policy purchased in January 2011 Cash Value after 5 years is \$1,095 Line from Schedule A/B 31.1			100% of fair market value, up to any applicable statutory limit	
 Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 No 			d on or after the date of adjustment.)	
Yes. Did you acquire the property covered No Yes	I by the exemption within	า 1,21	5 days before you filed this case?	

Filli	in this informa	ation to identify your cas	e:		
Deb	tor 1				7
		First Name	Middle Name	Last Name	}
	tor 2 use if, filing)	Donna Jeanne Deal First Name	Middle Name	Last Name	
Орос	ase ii, iiiiig)				
Unit	ed States Ban		EASTERN DISTRICT OF C DIVISION	ALIFORNIA, SACRAMENTO	
Cas	e number				
(if kno	own)				☐ Check if this is an amended filing
Off	ficial For	m 106C			
Sc	hedule	C: The Prop	erty You Cla	im as Exempt	12/15
prope	erty you listed o	on Schedule A/B: Property	(Official Form 106A/B) as yo	ogether, both are equally responsible for su bur source, list the property that you claim a ecessary. On the top of any additional page	as exempt. If more space is needed, fill
to a _l appli	particular doll	lar amount and the value	of the property is determi	exemption of 100% of fair market value ined to exceed that amount, your exem	
1. \	Which set of e	exemptions are you clain	ning? Check one only, even	n if your spouse is filing with you.	
	You are clai	ming state and federal nonl	pankruptcy exemptions. 11	U.S.C. § 522(b)(3)	
-	☐ You are clai	ming federal exemptions.	11 U.S.C. § 522(b)(2)		
2.	For any prope	erty you list on Schedule	A/B that you claim as exe	mpt, fill in the information below.	
		n of the property and line on nat lists this property	n Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
Dek	otor 2 Exem	<u>ptions</u>			
- 1	Brief description	on .			
	Line from Sche	eaule A/B.		100% of fair market value, up to any applicable statutory limit	
	(Subject to adju ■ No —	ustment on 4/01/16 and ever you acquire the property co		es filed on or after the date of adjustment.) n 1,215 days before you filed this case?	

Official Form 106C

Fill in this information to identify you	r case:			
Debtor 1 James Christop	oher Dean Middle Name Last Name			
Debtor 2 Donna Jeanne I	_			
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the:	EASTERN DISTRICT OF CALIFORNIA, SAC	CRAMENTO		
Case number(if known)				if this is an led filing
Official Form 106D				
	Who Have Claims Secure	d by Propert	y	12/15
	f two married people are filing together, both are eq t, number the entries, and attach it to this form. On t			
Do any creditors have claims secured by	vour property?			
	is form to the court with your other schedules. You	have nothing else to re	port on this form	
Yes. Fill in all of the information be	•	nave nothing else to le	port off tillo form.	
	elow.			
Part 1: List All Secured Claims		Column A	Column B	Column C
	nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabetic	cal order according to the creditor 's name.	Do not deduct the	that supports this	portion
2.1 Travis Fcu	Describe the property that secures the claim:	value of collateral. \$4,825.00	claim \$2,541.00	If any \$2.284.00
Creditor's Name	2007 Dodge Caliber	<u> </u>		<u> </u>
	As of the date you file, the claim is: Check all that			
PO Box 2069	apply.			
Vacaville, CA 95696-2069	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)	34.04		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
\square At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 6001			
Travis Federal Credit		\$00.504.00	#0.050.00	# 40.000.00
Union	Describe the property that secures the claim:	\$26,591.00	\$9,658.00	\$16,933.00
Creditor's Name	2014 Ford Focus			
	As of the date you file, the claim is: Check all that			
PO Box 2069	apply.			
Vacaville, CA 95696-2069	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	Disputed Nature of lien. Check all that apply.			
Debtor 1 only	■ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)	Juied		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)			

Official Form 106D

Debtor 1 James Christopher Dea		Ca	se number (f know)		
Debtor 2 Donna Jeanne Dean					
First Name Middle N	lame Last Name				
Date debt was incurred	Last 4 digits of account number (6002			
2.3 Vanderbilt Mortgage Creditor's Name	Describe the property that secures the clair	n:	\$50,883.00	\$53,000.00	\$0.00
	2008 Fleetwood Expression Mobile Home (Residence) 15 x 56				
Attn: Bankruptcy Dept PO Box 9800 Maryville, TN 37802-9800	As of the date you file, the claim is: Check all apply. Contingent	that			
Number, Street, City, State & Zip Code	☐ Unliquidated				
	Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	☐ An agreement you made (such as mortgage	e or secure	d		
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's	lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)				
Date debt was incurred	Last 4 digits of account number	3284			
-	lumn A on this page. Write that number here:		\$82,299.00		
If this is the last page of your form, add the Write that number here:	e dollar value totals from all pages.		\$82,299.00		
Part 2: List Others to Be Notified fo	r a Debt That You Already Listed				
trying to collect from you for a debt you o	e notified about your bankruptcy for a debt th we to someone else, list the creditor in Part 1 you listed in Part 1, list the additional credito is page.	, and then I	ist the collection agency	here. Similarly, if you ha	ave more
Name, Number, Street, City, State & Travis Credit Union	Zip Code	On which li	ne in Part 1 did you enter t	he creditor? 2.2	
PO Box 2069 Vacaville, CA 95696-2069		Last 4 digits	s of account number 600	02_	
Name, Number, Street, City, State & Travis Credit Union	Zip Code	On which lii	ne in Part 1 did you enter t	he creditor? 2.1	
PO Box 2069 Vacaville, CA 95696-2069		Last 4 digits	s of account number 600	<u>01 </u>	
Name, Number, Street, City, State & Vanderbilt Mortgage	Zip Code	On which li	ne in Part 1 did you enter t	he creditor? 2.3	
500 Alcoa Trl Maryville, TN 37804-5516		Last 4 digits	s of account number 82	<u>84</u>	

Fil	l in this informa	ation to identify your o	ase:					
De	btor 1	James Christoph	er Dean					
		First Name	Middle Nar	е	Last Name		- }	
	btor 2 ouse if, filing)	Donna Jeanne De			Loot Nome		_	
(Sp	ouse II, IIIIng)	First Name	Middle Nan	е	Last Name			
Un	ited States Banl	kruptcy Court for the:	EASTERN DI DIVISION	STRICT OF CALIFO	ORNIA, SA	CRAMENTO	_	
	se number							
(if k	nown)							Check if this is an
							a	mended filing
Of	ficial Form	106F/F						
		/F: Creditors W	ho Have I	Insecured C	laims			12/15
		accurate as possible. Use				art 2 for craditors with	NONDDIODITY clain	
Sch D: C the case	edule G: Executo Creditors Who Ha Continuation Page number (if know	ive Claims Secured by Pr ge to this page. If you hav wn).	red Leases (Office operty. If more some one information of the contraction of the contrac	ial Form 106G). Do r pace is needed, copy to report in a Part, c	not include a the Part yo	any creditors with partia u need, fill it out, numb	ally secured claims the entries in the	hat are listed in Schedule boxes on the left. Attach
		of Your PRIORITY Un						-1
1.	_ `	s have priority unsecure	d claims against	ou?				
	No. Go to Pa	ırt 2.						
	Yes.							
Pa	rt 2: List All	of Your NONPRIORITY	Y Unsecured C	aims				
3.	Do any creditor	s have nonpriority unsec	ured claims agai	nst you?				
	☐ No. You have	e nothing to report in this pa	art. Submit this for	m to the court with you	ur other sche	dules.		
	Yes.							
4.	unsecured claim	nonpriority unsecured cla , list the creditor separately r holds a particular claim, li	for each claim. F	or each claim listed, id	lentify what ty	pe of claim it is. Do not li	st claims already incl	uded in Part 1. If more
								Total claim
4.1	Bank of	America	L	ast 4 digits of accou	ınt number	8419		\$5,553.00
	Nonpriority NC4-105	Creditor's Name 5-03-14	v	hen was the debt in	curred?			
	PO Box		2					
		ooro, NC 27420-6012 eet City State Zlp Code		s of the date you file	e, the claim i	s: Check all that apply		
		red the debt? Check one.		, , , , , , , , , , , , , , , , , , , ,	,			
	Debtor 1	1 only	Γ	Contingent				
	Debtor 2	2 only		I Unliquidated				
		1 and Debtor 2 only		Disputed				
		one of the debtors and and		ype of NONPRIORIT	Y unsecured	d claim:		
		f this claim is for a comm		Student loans				
	debt		-	Obligations arising	out of a sepa	ration agreement or divo	rce that you did not	
	Is the claim	n subject to offset?	r	port as priority claims	3	· ·	•	
	■ No		[Debts to pension or	r profit-sharin	g plans, and other similar	debts	
	☐ Yes		- 1	Other. Specify				
								-

12345

Debto Debto		Donna Jeanne Case number	(if know)	
4.2	Citi	Last 4 digits of account number 0425		\$1,022.00
	Nonpriority Creditor's Name	When was the debt incurred?		
	701 E 60th St N Sioux Falls, SD 57104-0432 Number Street City State Zlp Code	A of the date were the the plains in Charles Habet		
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that	арріу	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement report as priority claims	or divorce that you did not	
	■ No	\square Debts to pension or profit-sharing plans, and other	r similar debts	
	Yes	Other. Specify		
4.3	Cr Bur USA	Last 4 digits of account number 5148		\$179.00
	Nonpriority Creditor's Name	When was the debt incurred?		
	757 L St	when was the dept incurred?		
	Fresno, CA 93721-2904			
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that	apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement report as priority claims	or divorce that you did not	
	No	☐ Debts to pension or profit-sharing plans, and othe	er similar dehts	
		_	1 Similar debis	
	Yes	Other. Specify		
4.4	Synchrony Bank/Sams Club Nonpriority Creditor's Name	Last 4 digits of account number 9834		\$7,903.00
	Attn: Bankruptcy PO Box 103104	When was the debt incurred?		
	Roswell, GA 30076-9104			
	Number Street City State ZIp Code	As of the date you file, the claim is: Check all that	apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement	or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharing plans, and othe	or similar dehts	
		_	i similal uebis	
	Yes	Other. Specify		

Debtor 1		mes Christopher & Dea	n, Donna Jeanne	Case r	number (f know)			
	Travis Cred		Last 4 digits of account number	er <u>7335</u>	<u> </u>	\$14,795.00		
			When was the debt incurred?					
		City State Zlp Code the debt? Check one.	As of the date you file, the clai	m is: Check	all that apply			
	Debtor 1 on	ıly	☐ Contingent					
	Debtor 2 on	ıly	☐ Unliquidated					
	Debtor 1 an	nd Debtor 2 only	☐ Disputed					
	☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecu	red claim:				
	_	is claim is for a community	☐ Student loans					
	debt	io olaini io ioi a oonimanity	☐ Obligations arising out of a se	eparation ag	reement or divorce that you did not			
	ls the claim su	ubject to offset?	report as priority claims					
	■ No		Debts to pension or profit-sha	aring plans, a	and other similar debts			
	☐ Yes		Other. Specify					
Part 3:	List Others	s to Be Notified About a Del	ot That You Already Listed					
is tryin have m	g to collect fro	om you for a debt you owe to se	about your bankruptcy, for a debt tha omeone else, list the original creditor at you listed in Parts 1 or 2, list the ad or submit this page.	in Parts 1 o	or 2, then list the collection agency	here. Similarly, if you		
	d Address		On which entry in Part 1 or Part 2 did you list the original creditor?					
Bk of A	Amer x 982238		Line 4.1 of (Check one):		Creditors with Priority Unsecured Clair			
	x 902230 o, TX 79998	3-2238		■ Part 2: Creditors with Nonpriority Unsecured Claims				
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Last 4 digits of account number	84	419			
Syncb	d Address 'Sams Club	DC	On which entry in Part 1 or Part 2 did y Line 4.4 of (<i>Check one</i>):		riginal creditor? Creditors with Priority Unsecured Clair	ns		
	x 965005	0.5005		Part 2:	Creditors with Nonpriority Unsecured (Claims		
Oriand	o, FL 3289	6-5005	Last 4 digits of account number	ast 4 digits of account number 9834				
Part 4:	Add the A	mounts for Each Type of Ui	nsecured Claim					
			nims. This information is for statistica	I reporting	purposes only. 28 U.S.C. §159. Add	the amounts for each		
type of	unsecured cla	aim.						
					Total Claim			
T.4.1.1.	6a.	Domestic support obligation	ıs	6a.	\$0.00			
Total cla from Pa		Taxes and certain other deb	ts you owe the government	6b.	\$ 0.00			
	6c.	Claims for death or personal	injury while you were intoxicated	6c.	\$ 0.00			
	6d.	Other. Add all other priority un	secured claims. Write that amount here.	. 6d.	\$ 0.00			
	6e.	Total Priority. Add lines 6a th	rough 6d	6e.	\$ 0.00	· 		
	00.	rotari nonty. Add into od tri	rough ou.	00.	Ψ 0.00			
	6f.	Student loans		6f.	Total Claim \$ 0.00			
Total cla			separation agreement or divorce that		\$ 0.00			
	6h.	you did not report as priority	/ claims naring plans, and other similar debts	6g. 6h.	·			
	6i.		y unsecured claims. Write that amount	6i.	\$ 0.00			
	5	here.	,		\$ 29,452.00			
6j. Total Nonpriority. Add lines 6f thr			of through 6i.	6j.	\$ 29,452.00			

Fill in this information to identify your case:	
Debtor 1 James Christopher Dean	
First Name Middle Name Last Name	
Debtor 2 Donna Jeanne Dean	
(Spouse if, filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: EASTERN DISTRICT OF CALIFORNIA, SAG	CRAMENTO
Case number	
()	'

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Numbe	n whom you have the r, Street, City, State and ZIP	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.2					<u> </u>
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	City		State	ZIP Code	
2.0	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4	,				
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	City		State	ZIF COUE	
2.5	Name				_
	Number	Street			_
	City		State	ZIP Code	_

Official Form 106G

Fill in this info	aumatian ta idantifu usuu				
	ormation to identify your				
Debtor 1	James Christoph First Name	er Dean Middle Name	Last Name		
Debtor 2	Donna Jeanne Do	ean		[
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF C	CALIFORNIA, SACRA	MENTO	
Case number					
(if known)					Check if this is an amended filing
Official F	form 106H				
Schedul	e H: Your Cod	ebtors			12/15
are filing toget and number th	ther, both are equally resp	onsible for supplying corrected the left. Attach the Additional	ct information. If mo	re space is needed, cop	as possible. If two married people by the Additional Page, fill it out, tional Pages, write your name and
1. Do you	have any codebtors? (If y	ou are filing a joint case, do no	ot list either spouse as	a codebtor.	
■ No □ Yes					
		lived in a community prope New Mexico, Puerto Rico, Te			tates and territories include Arizona,
				,	
□ No. Go					
■ Yes. Di	d your spouse, former spous	se, or legal equivalent live with	you at the time?		
	No				
	Yes.				
	In which community state	or territory did you live?	-NONE-	. Fill in the name and	d current address of that person.
	Name of your spouse, former sp				
	Number, Street, City, State & Zip) Code			
line 2 aga	in as a codebtor only if th hedule E/F (Official Form	at person is a guarantor or o	cosigner. Make sure	you have listed the cre	ith you. List the person shown in ditor on Schedule D (Official Form E/F, or Schedule G to fill out
	umn 1: Your codebtor e, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
Nam	e			□ Schedule E/F, lir	
				☐ Schedule G, line	
Num	ber Street			_	
City		State	ZIP Code		
				Cohedula D. P	
3.2 Nam	e			_ ☐ Schedule D, line☐ Schedule E/F, lir	
				☐ Schedule G, line	
Num	ber Street			_	
City	Sister Sister	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com Schedule H: Your Codebtors

Fill	in this information t	to identify your ca	se:				1				
	btor 1		stopher Dean								
1	btor 2 ouse, if filing)	Donna Jean				_					
Un	ited States Bankrup	otcy Court for the:	EASTERN DISTRICT SACRAMENTO DIVIS								
	se number			-			☐ Ar		ed filing	g postpetition wing date:	chapter 13
_	fficial Form						M	M / DD/ \	YYYY		
S	chedule I:	Your Inco	ome								12/15
spo atta Pa	rt 1: Describ	parated and your et to this form. On the Employment	are married and not filing with the top of any addition	th you, do not inclu	de inform	atio	about yo	our spou	se. If mor	e space is ne	eded,
1.	Fill in your empl information.	oyment		Debtor 1				Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with information about additional employers.		Employment status Employed Not employed				☐ Empl	oyed mployed			
			Occupation	Occupation				. 101 0			
	Include part-time self-employed wo		Employer's name								
	Occupation may homemaker, if it a		Employer's address								
			How long employed the	here?				_			
Pa	rt 2: Give De	tails About Mon	thly Income								
	imate monthly inco		te you file this form. If y	ou have nothing to re	eport for an	y line	e, write \$0	in the spa	ace. Includ	de your non-fili	ng spouse
	ou or your non-filing s ce, attach a separate		e than one employer, com m.	bine the information f	or all empl	oyers	s for that p	erson on	the lines b	pelow. If you no	eed more
							For Deb	tor 1		ebtor 2 or ling spouse	
2.			y, and commissions (be alculate what the monthly		2.	\$		0.00	\$	0.00	-
3.	Estimate and lis	t monthly overti	me pay.		3.	+\$		0.00	+\$	0.00	-
4.	Calculate gross	Income. Add line	e 2 + line 3.		4.	\$		0.00	\$	0.00]

Official Form 106I Schedule I: Your Income page 1

Debt Debt		Dean, James (Christopher & Dean, Donna Jeanne	_		Case	e number (if kn	own)	_				
						Fo	r Debtor 1			For Debtor			
	Copy	y line 4 here		4.		\$_	0	.00	- 7	\$		0.00	
5.	List a	all payroll deduct	tions:										
	5a.		and Social Security deductions	5a	1.	\$	0	.00		\$		0.00	
	5b.		tributions for retirement plans	5b		\$ -		.00	-	\$		0.00	-
	5c.	•	ibutions for retirement plans	50		\$.00	-	\$		0.00	-
	5d.	•	ments of retirement fund loans	50	1.	\$.00	_	\$		0.00	-
	5e.	Insurance		5e) .	\$	0	.00	-	\$		0.00	-
	5f.	Domestic supp	ort obligations	5f.		\$.00	_	\$		0.00	_
	5g.	Union dues		59	J.	\$	0	.00	-	\$		0.00	•
	5h.	Other deduction	ns. Specify:	5h	1.+	\$	0	.00	+	\$		0.00	-
6.	Add	the payroll deduc	ctions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	0	.00	. ;	\$		0.00	-
7.	Calc	ulate total month	ly take-home pay. Subtract line 6 from line 4.	7.		\$_	0	.00	- ;	\$		0.00	-
8.	List a 8a.	Net income from profession, or f Attach a stateme	ent for each property and business showing gross y and necessary business expenses, and the total	8a	۱.	\$	0	0.00		\$		0.00	
	8b.	Interest and div	ridends	8b).	\$	0	.00	-	\$		0.00	-
	8c.	regularly receive Include alimony,	payments that you, a non-filing spouse, or a dependent re spousal support, child support, maintenance, divorce property settlement.	80	; .	\$_	0	0.00	_	\$		0.00	_
	8d.	Unemployment		80	l.	\$	1,760	.00		\$		0.00	_
	8e.	Social Security		8e) .	\$_	0	.00	-	\$	89	9.00	_
	8f.	Include cash ass that you receive, Nutrition Assista Specify:	ent assistance that you regularly receive istance and the value (if known) of any non-cash assistance such as food stamps (benefits under the Supplemental nce Program) or housing subsidies.	8f.		\$_		0.00	-	\$		0.00	-
	8g.	Pension or retir		89		\$_		.00	_			7.75	=
	8h.	Otner monthly	income. Specify:	8h	1.+ _	\$_	0	.00	- + -	\$		0.00	
9.	Add	all other income.	Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_	1,760	.00] [:	\$	2,1	46.75	5
10.			come. Add line 7 + line 9. 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		1,760.00	+ \$		2,146.75	-	\$_	3,906.75
11.	State Include other	e all other regular de contributions fro friends or relatives ot include any amo	contributions to the expenses that you list in Schedule or an unmarried partner, members of your household, your de	epende						hedule J. 11.	+	\$	0.00
12			e last column of line 10 to the amount in line 11. The resu	ult io th	20.	oom	hinad manth	du in	00m				0.00
12.			ne Summary of Schedules and Statistical Summary of Certain								\$		3,906.75
13.	Do y	ou expect an inc No.	rease or decrease within the year after you file this form?								m		y income
		Yes. Explain:	Debtor lost his job with Sackett Co on March 18 received an unemployment check but he is set							come. He	ha	s ha	s not
			Joint Debtor's Social Security Benefit is \$1,004 insurance. Net is reflected on Sch I. Joint Debtor's Retirement is \$1,527.00 Gross. A Net is reflected above.										7.75. The

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case	e:				
Deb	James Christophe	er Dean			if this is:	
	otor 2 Donna Jeanne De	an			An amended filing A supplement show expenses as of the f	ing postpetition chapter 13 following date:
Unit	ted States Bankruptcy Court for the: EAS SAC	STERN DISTRICT OF CALIFO CRAMENTO DIVISION	RNIA,	N	MM / DD / YYYY	
	se number nown)					
	fficial Form 106J					
	chedule J: Your Exp					12/
info	as complete and accurate as possibormation. If more space is needed, a known). Answer every question.	ole. If two married people are attach another sheet to this fo	filing together, both a orm. On the top of any	re equally additiona	responsible for s I pages, write you	supplying correct ir name and case numb
Par 1.	Describe Your Household Is this a joint case?					
	No. Go to line 2.					
	Yes. Does Debtor 2 live in a sep	parate household?				
	No					
	☐ Yes. Debtor 2 must file O	official Form 106J-2, Expenses f	or Separate Household	of Debtor	2.	
2.	Do you have dependents?	0				
	Do not list Debtor 1 and Ye Debtor 2.	es. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.					☐ Yes
						□ No □ Yes
						☐ Yes
						☐ Yes
						□ No
						☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?	■ No □ Yes				
	t 2: Estimate Your Ongoing Mor	nthly Expenses				
exp	timate your expenses as of your bar benses as of a date after the bankru plicable date.					
	lude expenses paid for with non-cas ue of such assistance and have incl					
(Of	ficial Form 106l.)				Your expe	enses
4.	The rental or home ownership exp payments and any rent for the ground		clude first mortgage	4. \$		800.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, or ren	ter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, a	nd upkeep expenses		4c. \$		0.00
	4d. Homeowner's association or c			4d. \$		0.00
5.	Additional mortgage payments for	r your residence, such as hom	ne equity loans	5. \$		0.00

Official Form 106J Schedule J: Your Expenses page 1

6 6 F	a. Electricity, heat, natural gas b. Water, sewer, garbage collection	6a.	•	
6 F C			\$	200.00
6 F C		6b.	\$	0.00
F	c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	180.00
C	d. Other. Specify:	6d.	·	0.00
	ood and housekeeping supplies	7.	\$	600.00
_	hildcare and children's education costs	8.	\$	0.00
	lothing, laundry, and dry cleaning	9.	\$	100.00
	ersonal care products and services	10.	·	100.00
	ledical and dental expenses	11.	\$	50.00
	ransportation. Include gas, maintenance, bus or train fare. o not include car payments.	12.	\$	250.00
	o not include car payments. ntertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00
	haritable contributions and religious donations	14.		0.00
	nurance.	17.	Ψ	0.00
	o not include insurance deducted from your pay or included in lines 4 or 20.			
	5a. Life insurance	15a.	\$	130.00
1	5b. Health insurance	15b.	\$	24.00
1	5c. Vehicle insurance	15c.	\$	130.00
	5d. Other insurance. Specify:	15d.	\$	0.00
S	axes. Do not include taxes deducted from your pay or included in lines 4 or 20. pecify:	16.	\$	0.00
	nstallment or lease payments: 7a. Car payments for Vehicle 1	17a.	¢	274.00
	7b. Car payments for Vehicle 2	17a. 17b.		274.00
	7c. Other. Specify:	17b.	·	393.00
	7d. Other. Specify:	- 17d.	·	0.00
	our payments of alimony, maintenance, and support that you did not report as	- 17 U.	Ψ	0.00
	educted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
	ther payments you make to support others who do not live with you.		\$	0.00
	pecify:	19.		_
C	ther real property expenses not included in lines 4 or 5 of this form or on Schedule			
	Oa. Mortgages on other property	20a.		0.00
	0b. Real estate taxes	20b.	·	0.00
	Oc. Property, homeowner's, or renter's insurance	20c.		0.00
	0d. Maintenance, repair, and upkeep expenses	20d.		0.00
	0e. Homeowner's association or condominium dues	20e.	·	0.00
С	ther: Specify:	_ 21.	+\$	0.00
С	alculate your monthly expenses			
2	2a. Add lines 4 through 21.		\$	3,431.00
2	2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	•
2	2c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,431.00
_	aladata a a a a a dha a a tha a a tha a a a			
	alculate your monthly net income. 3a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	¢	2 000 75
				3,906.75
2	3b. Copy your monthly expenses from line 22c above.	23b.	- -	3,431.00
2	3c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	475.75
	The results your <i>monthly het income.</i>	200.		

Official Form 106J Schedule J: Your Expenses page 2

Explain here: Some expenses are estimated as Debtors will be surrendering their mobile home.

Yes.

Fill in this infor	mation to identify your	case:		
Debtor 1	James Christoph	er Dean		
	First Name	Middle Name	Last Name	
Debtor 2	Donna Jeanne D	ean		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C DIVISION	F CALIFORNIA, SACRAMEN	NTO
Case number				
(if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below										
Did	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?										
	No										
	Yes. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)							
tha X	er penalty of perjury, I declare that I have read the summary and Docusigned by: rrect. Jamus Duan 728561A7AD3345E er Dean Signature of Debtor 1 Date 3/31/2016	nd so	hedules filed with this of DocuSigned by: Nound Dean 728581A7AD3345E Donna Jeanne Dean Signature of Debtor 2 3/31/2016 Date								

Bank of America NC4-105-03-14 PO Box 26012 Greensboro, NC 27420-6012

Bk of Amer PO Box 982238 El Paso, TX 79998-2238

Citi 701 E 60th St N Sioux Falls, SD 57104-0432

Cr Bur USA 757 L St Fresno, CA 93721-2904

Syncb/Sams Club DC PO Box 965005 Orlando, FL 32896-5005

Synchrony Bank/Sams Club Attn: Bankruptcy PO Box 103104 Roswell, GA 30076-9104

Travis Credit Union PO Box 2069 Vacaville, CA 95696-2069 Travis Fcu PO Box 2069 Vacaville, CA 95696-2069

Travis Federal Credit Union PO Box 2069 Vacaville, CA 95696-2069

Vanderbilt Mortgage Attn: Bankruptcy Dept PO Box 9800 Maryville, TN 37802-9800

Vanderbilt Mortgage 500 Alcoa Trl Maryville, TN 37804-5516

Fill	in this infor	mation to identify your	case:			
	otor 1	James Christop				
		First Name	Middle Name	Last Name		
1	otor 2 use if, filing)	Donna Jeanne D	Dean Middle Name	Last Name		
ОРО	use II, IIIIIg)	i iist ivaine				
Unit	ted States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF CADIVISION	ALIFORNIA, SACRAMENI		
Cas	se number					
(if kn	own)					Check if this is an
						amended filing
Sta Be a infor	s complete a	and accurate as possib	Affairs for Individuole. If two married people are fattach a separate sheet to this	iling together, both are ed	qually responsible for supply	
(if kr		er every question. Details About Your Ma	rital Status and Where You Liv	ved Before		
1.		ır current marital statu				
	■ Married Not ma	-				
2.	During the	last 2 years have you	lived anywhere other than whe	oro vou livo now?		
۷.	During the	iast 5 years, nave you	iived ally where other than who	ere you live now:		
	□ No					
	Yes. Lis	st all of the places you liv	red in the last 3 years. Do not inc	lude where you live now.		
	Debtor 1 P	rior Address:	Dates Debtor 1 live there	ed Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
			From-To:	☐ Same as Debtor ? 3123 Sonata Dr Las Vegas, NV	•	☐ Same as Debtor 1 From-To: 8/2015 - 3/2016
	es and territor	ries include Arizona, Cali	er live with a spouse or legal of ifornia, Idaho, Louisiana, Nevad edule H: Your Codebtors (Officia	a, New Mexico, Puerto Ric		
Par	t 2 Expla	in the Sources of Your	Income			
	Fill in the tot	al amount of income you	nployment or from operating a u received from all jobs and all b ave income that you receive toge	ousinesses, including part-t	time activities.	dar years?
	□ No					
	Yes. Fi	II in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)

Official Form 107

Debtor 1 Dean, James Christopher & Dean, Donna Jeanne Case number (if known) Debtor 2 Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and (before deductions Check all that apply. exclusions) and exclusions) From January 1 of current year until \$10,560.00 \$0.00 ☐ Wages, commissions, Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For last calendar year: \$2,058.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$32,278.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below.. (before deductions and Describe below. (before deductions exclusions) and exclusions) From January 1 of current year until 2016 Tax Refund \$2,669.00 the date you filed for bankruptcy: from 2015 Tax Return Fed: \$2,305 State: \$364 For last calendar year: 2015 - Unemployment \$1.889.00 2015 - Pension \$30,575.00 (January 1 to December 31, 2015) \$1.889 \$18,324 2015 - Social Security \$12,251 2015 Tax Refund \$493.00 from 20014 Tax Return Fed: \$0.00 State: \$493 Fed: \$ For the calendar year before that: 2014 -\$2,226.00 2014 - Pension: \$28,368.00 (January 1 to December 31, 2014) **Unemployment:** \$18,049 \$2,226 2014 - Social Security: \$10,319

	btor 1 btor 2	an, James	s Christopher & Dea	an, Donna Jeanne	Cas	se number (if known)		
Pa	rt 3: List	: Certain Pa	vments You Made Befo	ore You Filed for Bankrup	tcv			
6.		Debtor 1's Neither De	or Debtor 2's debts pri	imarily consumer debts? as primarily consumer debts amily, or household purpose	its. Consumer debts	are defined in 11 L	J.S.C. § 101(8)	as "incurred by an
		□ No.	90 days before you filed Go to line 7.	for bankruptcy, did you pay	any creditor a total of	f \$6,225* or more?		
		☐ Yes	creditor. Do not includ payments to an attorne	or to whom you paid a total o le payments for domestic su ey for this bankruptcy case. 6 and every 3 years after that	upport obligations, su	uch as child suppo	rt and alimony.	
	Yes.			re primarily consumer deb for bankruptcy, did you pay		f \$600 or more?		
		■ No.	Go to line 7.					
		□ Yes	List below each credito	or to whom you paid a total o support obligations, such a				
	Creditor'	s Name and	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	nyment for
7.	Insiders in which you business y No Yes.	clude your re are an office ou operate a	elatives; any general partrer, director, person in con as a sole proprietor. 11 U.	cy, did you make a payme ners; relatives of any genera itrol, or owner of 20% or moi .S.C. § 101. Include paymen	I partners; partnershi e of their voting secunts for domestic supp	ips of which you are urities; and any mar port obligations, suc	e a general part naging agent, in ch as child supp	ner; corporations of cluding one for a port and alimony.
	insider's	Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	insider? Include pa	yments on d	you filed for bankrupto ebts guaranteed or cosig ents to an insider	cy, did you make any payr gned by an insider.	nents or transfer ar	ny property on ac	count of a del	ot that benefited an
		Name and		Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pa	rt 4: Ide	ntify Legal A	Actions, Repossession	s, and Foreclosures				
9.	List all suc			cy, were you a party in any cases, small claims actions,				
	■ No □ Yes.	Fill in the de	etails.					
	Case title			Nature of the case	Court or agency		Status of th	e case
10.			you filed for bankruptond fill in the details below	cy, was any of your prope v.	rty repossessed, fo	oreclosed, garnish	ed, attached,	seized, or levied?
	■ No □ Yes.	Fill in the info	ormation below.					
		Name and A		Describe the Property		Date		Value of the property
				Explain what happened				,

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

	btor 1 btor 2 Dean, James Christopher & Dean, D	Oonna Jeanne Case number (i	f known)						
	accounts or refuse to make a payment because y	you owed a debt?							
	Yes. Fill in the details. Creditor Name and Address De	scribe the action the creditor took	Date action was	Amount					
12.	Within 1 year before you filed for bankruptcy, wa court-appointed receiver, a custodian, or anothe	as any of your property in the possession of an as r official?	taken signee for the benefit	of creditors, a					
	■ No □ Yes								
Par	rt 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankruptcy, d ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	lid you give any gifts with a total value of more that Describe the gifts	n \$600 per person? Dates you gave the gifts	Value					
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity No Yes. Fill in the details for each gift or contribution.								
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value					
Par	rt 6: List Certain Losses								
		since you filed for bankruptcy, did you lose anythi	ng because of theft, f	ire, other disaster,					
	■ No □ Yes. Fill in the details.								
	how the loss occurred Include	be any insurance coverage for the loss the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost					
Par	rt 7: List Certain Payments or Transfers								
16.	consulted about seeking bankruptcy or preparin	d you or anyone else acting on your behalf pay or g a bankruptcy petition? or credit counseling agencies for services required in y		to anyone you					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	Bankruptcy Law Group, PC 1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923	Attorney Fee: \$0.00, \$1,700 balance will be paid post-filing Court Fee: \$335 Costs: \$100 (Credit Report & Educational Courses)		\$435.00					

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? No		tor 1 Dean, James Christopher & Dean,	Donna Jeanne		Case number	(if known)				
Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment or transfer was made	17.	promised to help you deal with your creditors	or to make payments t			transfer any property	y to anyone who			
Address Second		_								
transferred in the ordinary course of your business or financial affairs? Include both outlight transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No			•	alue of any prope	erty	transfer was				
Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Date Tr	18.	transferred in the ordinary course of your businclude both outright transfers and transfers made gifts and transfers that you have already listed on the No	iness or financial affair as security (such as the	rs?						
Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Do you still have it?		Address			payments	received or debts				
List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No	19.	beneficiary? (These are often called asset-protection devices.) No								
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP code) No Yes. Fill in the details. No you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you still have it?		Name of trust	Description and va	alue of the prope	rty transferre	ed				
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account or instrument closed, sold, moved, or transferred Last balance before closing or transfer moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Par	List of Certain Financial Accounts, Instru	uments, Safe Deposit E	Boxes, and Stora	ge Units					
Address (Number, Street, City, State and ZIP account number instrument closed, sold, moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)	20.	sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated. No	other financial account	s; certificates of						
No Ves. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Do you still have it? No Ves. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Do you still have it?		Address (Number, Street, City, State and ZIP	•		clo	osed, sold, oved, or				
Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents Do you still have it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents Do you still have it?	21.		ar before you filed for b	oankruptcy, any s	safe deposit	box or other deposito	ry for securities,			
Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)		_ 110								
No ☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State			Address (Number, St		Describe the	contents				
☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)	22.	_	place other than your h	nome within 1 yea	ar before you	ı filed for bankruptcy				
Address (Number, Street, City, State and ZIP Code) to it? Address (Number, Street, City, State		_								
		•	to it? Address (Number, St		Describe the	contents				

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for

Deb Deb	tor 1 Dean, James Christopher & Dean, D	Donna Jeanne	Case number (if known)							
	someone.									
	=									
	■ No □ Yes. Fill in the details.									
	Owner's Name	Where is the property?	Describe the property	Value						
	Address (Number, Street, City, State and ZIP Code)	(Number, Street, City, State and ZIP Code)	ээээнэ шо ргорону	0 41.40						
Part	10: Give Details About Environmental Informa	ation								
For t	he purpose of Part 10, the following definitions a	apply:								
	Environmental law means any federal, state, or l toxic substances, wastes, or material into the air controlling the cleanup of these substances, was	r, land, soil, surface water, groundw	- ·							
	Site means any location, facility, or property as own, operate, or utilize it, including disposal site	-	aw, whether you now own, operate, or	r utilize it or used to						
	Hazardous material means anything an environr material, pollutant, contaminant, or similar term.		waste, hazardous substance, toxic su	ıbstance, hazardous						
Repo	ort all notices, releases, and proceedings that yo	u know about, regardless of when t	hey occurred.							
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable ı	under or in violation of an environme	ntal law?						
	■ No									
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any release of hazardous material?									
	■ No.									
	■ No □ Yes. Fill in the details.									
	Name of site	Governmental unit	Environmental law, if you	Date of notice						
	Address (Number, Street, City, State and ZIP Code)	Address (Number, Street, City, State and ZIP Code)								
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.									
	■ No									
	Yes. Fill in the details.									
	Case Title	Court or agency	Nature of the case	Status of the						
	Case Number	Name Address (Number, Street, City, State and ZIP Code)		case						
Part	11: Give Details About Your Business or Conr	nections to Any Business								
27.	Within 4 years before you filed for bankruptcy, o	lid vou own a business or have any	of the following connections to any	business?						
		•								
	 □ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time □ A member of a limited liability company (LLC) or limited liability partnership (LLP) 									
	☐ A partner in a partnership									
	☐ An officer, director, or managing executive of a corporation									
	☐ An owner of at least 5% of the voting or o									
	_ / oo. o. at .oaot o /o or the voting or v	-q, oooaiiiioo oi a ooipoialioii								

Official Form 107

	otor 1 otor 2 Dean, James Christopher & Dea	nn, Donna Jeanne	Case number(if known)
	■ No. None of the above applies. Go to F Yes. Check all that apply above and fill	Part 12. in the details below for each business.	
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties. No Yes. Fill in the details below.	cy, did you give a financial statement to a	nyone about your business? Include all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
I ha true	and correct. I understand that making a false result in fines up to \$250,00 1, 1519, and 3571. AMUS DEAM 7, 1519, and 3571. 728561A7AD3345E mes Christopher Dean nature of Debtor 1 3/31/2016		declare under penalty of perjury that the answers are ning money or property by fraud in connection with a both.
Did ■ N		nt of Financial Affairs for Individuals Filin	g for Bankruptcy (Official Form 107)?
	•	an attorney to help you fill out bankrupto	•

	check one box only as directed in this form ar	id in Form
Debtor 1 James Christopher Dean	22A-1Supp:	
Debtor 2 (Spouse, if filing) Donna Jeanne Dean	■ 1. There is no presumption of abuse	
United States Bankruptcy Court for the: Eastern District of California, Sacramento Division	☐ 2. The calculation to determine if a presu applies will be made under <i>Chapter 7</i> <i>Calculation</i> (Official Form 122A-2).	•
Case number (if known)	☐ 3. The Means Test does not apply now be military service but it could apply later.	
	\square Check if this is an amended filing	
Official Form 122A - 1		
Chapter 7 Statement of Your Current Monthly Inc	come	12/1
Be as complete and accurate as possible. If two married people are filing together, both are equa a separate sheet to this form. Include the line number to which the additional information applies number (if known). If you believe that you are exempted from a presumption of abuse because you military service, complete and file Statement of Exemption from Presumption of Abuse Under § 2	s. On the top of any additional pages, write your ou do not have primarily consumer debts or bed	name and case cause of qualifying
Part 1: Calculate Your Current Monthly Income		
What is your marital and filing status? Check one only.		
□ Not married. Fill out Column A, lines 2-11.		
■ Married and your spouse is filing with you. Fill out both Columns A and B, lines	3 2-11.	
☐ Married and your spouse is NOT filing with you. You and your spouse are:		
☐ Living in the same household and are not legally separated. Fill out both Co	lumns A and B, lines 2-11.	
☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do not penalty of perjury that you and your spouse are legally separated under nonbankrule apart for reasons that do not include evading the Means Test requirements. 11 U.	uptcy law that applies or that you and your spo	
Fill in the average monthly income that you received from all sources, derived during the 6 fu 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 thro 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include a own the same rental property, put the income from that property in one column only. If you have not	ough August 31. If the amount of your monthly incomany income amount more than once. For example,	me varied during the
	Column A Column B Debtor 1 Debtor 2 or non-filing spouse	
Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$\$\$0.00	_
Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$\$0.00	_
4. All amounts from any source which are regularly paid for household expenses		

5.	Net income from operating a business, profession,	or farm

Do not include payments you listed on line 3

of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in.

Gross receipts (before all deductions)	\$	0.00			
Ordinary and necessary operating expenses	-\$	0.00			
Net monthly income from a business, profession, or far	rm \$	0.00	Copy here -> \$	0.00	\$ 0.00
Net income from rental and other real property					
		Deb	otor 1		
Gross receipts (before all deductions)	\$	0.00			
Ordinary and necessary operating expenses	-\$	0.00			
Net monthly income from rental or other real property	\$	0.00	Copy here -> \$	0.00	\$ 0.00
Interest, dividends, and royalties	•		\$	0.00	\$ 0.00

Debtor 1

7. Interest, dividends, and royalties

Official Form 122A-1

6.

0.00

0.00

Debtor 1 Dean, James Christopher & Dean, Donna Jeanne Case number (if known) Debtor 2 Column A Column B Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse \$ 0.00 Pension or retirement income. Do not include any amount received that was a benefit 0.00 1,527.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 2.884.29 1.527.00 4.411.29 each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 4,411.29 Multiply by 12 (the number of months in a year) **x** 12 52,935.48 12b. The result is your annual income for this part of the form 12h 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. CA 2 Fill in the number of people in your household. 66,458.00 Fill in the median family income for your state and size of household. 13 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy cleix office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 17, here is no presumption of abuse. 14a. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below DocuSigned by: under penalty of perjury that the information on the attachments is true and correct.

Official Form 122A-1

Date

Date

Signature of Debtor 2 3/31/2016

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

MM / DD / YYYY

Fill in this infor	mation to identify your case:		
Debtor 1	James Christopher Dean		
	First Name Middle Nam	e Last Name	
Debtor 2 Spouse if, filing)	Donna Jeanne Dean First Name Middle Nam	e Last Name	
	EASTERN DIS ankruptcy Court for the: DIVISION	STRICT OF CALIFORNIA, SACRAMENTO	
	<u> </u>	_	
Case number if known)			☐ Check if this is an amended filing
		lividuals Filing Under Chapte	er 7 12/15
you have least ou must file th	ever is earlier, unless the court extends	not expired. er you file your bankruptcy petition or by the date set fo the time for cause. You must also send copies to the cr	
and da	ate the form.	ooth are equally responsible for supplying correct informs is needed, attach a separate sheet to this form. On the	_
. For any credit		D: Creditors Who Have Claims Secured by Property (O What do you intend to do with the property that secures a debt?	fficial Form 106D), fill in the Did you claim the property as exempt on Schedule C?
Creditor's	Travis Fcu	☐ Surrender the property.	■ No
name: Description of property securing debt.	f 2007 Dodge Caliber	 □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
Creditor's	Fravis Federal Credit Union	☐ Surrender the property.	■ No
name:		Retain the property and redeem it.	
Description of property		 Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: 	☐ Yes
securing debt			
Creditor's \	Vanderbilt Mortgage	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of	f 2008 Fleetwood Expression	 Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: 	Yes

Statement of Intention for Individuals Filing Under Chapter 7

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Official Form 108

page 1

Debtor 1 Debtor 2 Dean, James Christopher & Dean, Donna Jeanne	Case number (if known)
securing debt:	
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executor the information below. Do not list real estate leases. Unexpired leases are leases the may assume an unexpired personal property lease if the trustee does not assume in the state of	nat are still in effect; the lease period has not yet ended. You
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
Lessor's name: Description of leased Property:	□ No □ Yes
X James Deah X James Christopher Dean Signature of Debtor 1 X Don X Signature	pperty of my estate that secures a debt and any personal susigned by: MA DUM 55147AB3345E are of Debtor 2 /31/2016

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California, Sacramento Division

In	re Dean, James Christopher & Dean, Donna Jeann	ne	Case N	0.	
		Debtor(s)	Chapte	7	
	DISCLOSURE OF COMPENS	SATION OF ATT	ORNEY FOR	DEBTOR	
Ι.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankrup	tcy, or agreed to be	paid to me, for services	
	For legal services, I have agreed to accept		\$	1,700.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	1,700.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
1.	■ I have not agreed to share the above-disclosed compensatirm.	ation with any other per	son unless they are n	nembers and associates	of my law
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				law firm. A
5.	In return for the above-disclosed fee, I have agreed to render	r legal service for all as	pects of the bankrup	ccy case, including:	
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statementc. Representation of the debtor at the meeting of creditors andd. [Other provisions as needed]	nt of affairs and plan wl	nich may be required	l;	nkruptcy;
б.	By agreement with the debtor(s), the above-disclosed fee do Motion work and representation in an adver-		ving service:		
	Cl	ERTIFICATION			
this	I certify that the foregoing is a complete statement of any ag bankruptcy proceeding.	DocuSigned by:		for representation of the	e debtor(s) in
	3/31/2016	Paul Bain			
	Date	Signature of Attor Bankruptcy La	rney		
		paulb@bankru	A 95815-4923 Fax: (888) 843-7 ptcylg.com	260	
		Name of law firm			

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UNITED STATES BANKRUPTCY COURT Eastern District of California, Sacramento Division

)))	Case No
)	
))))

VERIFICATION OF MASTER ADDRESS LIST

I (we) declare under penalty of perjury that the Master Address List submitted for filing in this case is a true, correct, and complete listing.

I (we) acknowledge that the accuracy and completeness of the Master Address List is the shared responsibility of the debtor(s) and the debtor's(s') attorney or bankruptcy petition preparer, if any.

I (we) further acknowledge that the Court will rely on the Master Address List for all mailings, and that the various schedules and statements required by the Bankruptcy Code and the Federal Rules of Bankruptcy Procedure will not be used for mailing purposes.

	3/31/2016	Richard Pagan
DATED:		36D1E17BE791447
		Dobtor's Cianatura DocuSigned by:
DATED:	3/31/2016	Mcole Marie Pagan
•		Joint Debtor's (if any) Signature

Submit this form and your Master Address List to one of the following addresses:

Sacramento Division 501 I Street, Suite 3-200 Sacramento, CA 95814

Modesto Division
Mailing Address:
501 I Street, Suite 3-200
Sacramento, CA 95814

Fresno Division 2500 Tulare Street, Suite 2501 Fresno, CA 93721

Physical Address: 1200 I Street, Suite 4 Modesto, CA 95354

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION	_
Case number (if known):	

Official Form 121

Statement About Your Social Security Numbers

12/15

Use this form to tell the court about any Social Security or federal Individual Taxpayer Identification numbers you have used. Do not file this form as part of the public case file. This form must be submitted separately and must not be included in the court's public electronic records. Please consult local court procedures for submission requirements.

To protect your privacy, the court will not make this form available to the public. You should not include a full Social Security Number or Individual Taxpayer Number on any other document filed with the court. The court will make only the last four digits of your numbers known to the public. However, the full numbers will be available to your creditors, the U.S. Trustee or bankruptcy administrator, and the trustee assigned to your case.

		For Debtor 1:	For Debtor 2 (Only if Spouse is Filing:)
1.	Your name	Richard	Nicole
		First name	First name
		Anthony	Marie
		Middle name	Middle name
		Pagan	Pagan
		Last name	Last name
•	All Social Security Numbers you have used	-0929	-7782
		☐ You do not have a Social Security Number	☐ You do not have a Social Security Number
	All federal Individual Taxpayer Identification		
	Numbers (ITIN) you have used	You do not have an ITIN.	You do not have an ITIN.
ar	3: Sign Below		
		Under penalty of perjury, I declare that the information I have pocusioned by: x X X X X X X X X X X X X	Under penalty of perium I declare that the information procusing by: Note Marie Pagan Signature of Debtor 2 3/31/2016

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Part 1: Identify Yourself					
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name				
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Richard First name	Nicole First name		
		Anthony Middle name	Marie Middle name		
	Bring your picture identification to your meeting with the trustee.	Pagan	Pagan Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years Include your married or maiden names.	Richard A Pagan Richard Pagan	Nicole M Pagan Nicole M Sutherland Nicole Marie Sutherland Nicole Pagan Nicole Sutherland		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0929	xxx-xx-7782		

Debtor 1 Debtor 2

Pagan, Richard Anthony & Pagan, Nicole Marie

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)
		EINs	EINs
5.	Where you live	524 E Wigeon Way	If Debtor 2 lives at a different address:
		Suisun City, CA 94585-2146 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Solano County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

page 2

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Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

	otor 1 otor 2 Pagan, Richard A	nthony & Pag	an, Nicole Marie	Case numb	ΘΓ (if known)			
Par	t 2: Tell the Court About	Your Bankruptcy	r Case					
7.	The chapter of the Bankruptcy Code you are	Check one. (Fo	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	Chapter 7						
		☐ Chapter 11						
		☐ Chapter 12						
		☐ Chapter 13						
8.	How you will pay the fee	about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with pre-printed address.						
		☐ I need to Filing Fee	e in Installments (Official Form 103A)).	tach the Application for Individuals to Pay The			
		not requi	ed to, waive your fee, and may do so	only if your income is less than fee in installments). If you choo	e filing for Chapter 7. By law, a judge may, but is a 150% of the official poverty line that applies to use this option, you must fill out the <i>Application</i> a your petition.			
9.								
	bankruptcy within the last 8 years?	☐ Yes.						
		Dist	rict	When	Case number			
		Dist	rict	When	Case number			
		Dist	rict	When	Case number			
10.	Are any bankruptcy cases	■ No						
	pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Deb	tor		Relationship to you			
		Dist	rict	When	Case number, if known			
		Deb			Relationship to you			
		Dist	rict	When	Case number, if known			
11.	Do you rent your residence?	□ No. Go	o to line 12.					
	residerice :	■ Yes. Ha	as your landlord obtained an eviction j	udgment against you and do yo	ou want to stay in your residence?			
		_	No. Go to line 12.					

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	tor 1 tor 2 Pagan, Richard A	nthony &	& Pagan	, Nicole Marie		Case number (if known)		
Dow	2. Bonort About Any Du	-: \	v 0	aa a Cala Buanniat				
Part		sinesses	You Own	as a Sole Proprieto	or 			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a							
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	er, Street, City, Star	te & ZIP Code			
	to this petition.		Chec	k the appropriate bo	x to describe your busine	ess:		
				Health Care Busin	ess (as defined in 11 U.S	S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11	U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101	1(53A))		
				Commodity Broke	r (as defined in 11 U.S.C	. § 101(6))		
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> debtor?	deadlines operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am r	not filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		11, but I am NOT a sma	all business debtor according to the definition	in the Bankruptcy	
		☐ Yes.	I am f	iling under Chapter	11 and I am a small bus	siness debtor according to the definition in th	e Bankruptcy Code.	
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs I	Immediate Attention		
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable	☐ Yes.	What is	the hazard?				
	hazard to public health or safety? Or do you own							
	any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, Stat	te & Zip Code		

Debtor 1 Debtor 2

Pagan, Richard Anthony & Pagan, Nicole Marie

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

DocuSign Envelope ID: E3C947AF-3E9D-4AE7-A17C-7557140EB747. Filed 05/03/16 Doc 15 Debtor 1 Pagan, Richard Anthony & Pagan, Nicole Marie Case number (if known) Debtor 2 Part 6: **Answer These Questions for Reporting Purposes** What kind of debts do 16 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C.§ 101(8) as "incurred by an you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Do you estimate that after Yes. any exempt property is paid that funds will be available to distribute to unsecured creditors? excluded and administrative expenses ■ No are paid that funds will be available for distribution ☐ Yes to unsecured creditors? 18. How many Creditors do 1-49 **1.000-5.000 1** 25.001-50.000 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0.001-25.000 ☐ More than 100.000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50.000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$10,000,000,001 - \$50 billion □ \$50,000,001 - \$100 million **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your liabilities to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion ■ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. DocuSigned by: DocuSigned by: statement, concealing property, or ob in connection with a bankruptcy Richard Pagan o \$250,000, or imprisonment for up to Moole Marie Pagan 52, 1341, 1519, and 3571.

65CBA000AFDE4A0...

3/31/2016

MM / DD / YYYY

Signature of Debtor 2

Executed on

36D1E17BF791447...

3/31/2016

MM / DD / YYYY

Signature of Debtor 1

Executed on

page 6

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Debtor 1 Debtor 2 Pagan, Richard A	Anthony & Pagan, Nicole Marie	Cas	e number (if known)
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	Chapter 7, 11, 12, or 13 of title 11, United State person is eligible. I also certify that I have delive	s Code, and have explained ered to the debtor(s) the notice	ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the ce required by 11 U.S.C. § 342(b) and, in a case in ry that the information in the schedules filed with the 3/31/2016 MM / DD / YYYY
	Printed name Bankruptcy Law Group, PC Firm name 1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923 Number, Street, City, State & ZIP Code Contact phone (707) 422-8500 268004 Bar number & State	Email address	paulb@bankruptcylg.com

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Fill in this infor	mation to identify your	case:		
Debtor 1	Richard Anthony	Pagan		
	First Name	Middle Name	Last Name	
Debtor 2	Nicole Marie Pag	an		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENT	0
Case number				
(if known)				☐ Check if this amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,734.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	11,734.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	9,500.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F	\$	28,824.92
	Your total liabilities	\$	38,324.92
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	4,822.14
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,907.50
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your of	her schedu	les.
	■ Yes		

- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Debtor	Pagan, Richard Anthony & Pagan, Nicole		
Debtor 2	2 Marie Case number (if known)		
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this bocourt with your other schedules.	r and sub	mit this form to the
	om the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 2A-1 Line 11:0R Form 122B Line 11:0R Form 122C-1 Line 14	\$	5,512.63

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Port A on Calcula E/F came the following.	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	9,500.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	9,500.00

Fill in this inforr				
	mation to identify your case	and this filing:		
Debtor 1	Richard Anthony Pa	gan		
Debtor 2	First Name	Middle Name Last Name		
(Spouse, if filing)	Nicole Marie Pagan First Name	Middle Name Last Name		
United States Ba	ankruptcy Court for the: EA	STERN DISTRICT OF CALIFORNIA, SACRAMENTO I	DIVISION	
Coop number				П о
Case number _				Check if this is ar amended filing
			_	-
Official Fo	orm 106A/B			
_	le A/B: Prope	rtv		12/15
		ns. List an asset only once. If an asset fits in more than or	ne category, list the asset in	
think it fits best. B	Be as complete and accurate as re space is needed, attach a se	possible. If two married people are filing together, both ar parate sheet to this form. On the top of any additional page	e equally responsible for sup	pplying correct
		and an Other Beat Fateta Van Ours and Have an Internation		
Part 1: Describe	Each Residence, Building, Lai	nd, or Other Real Estate You Own or Have an Interest In		
1. Do you own or h	have any legal or equitable inte	erest in any residence, building, land, or similar property?		
No. Go to Par	rt 2.			
☐ Yes. Where i	is the property?			
Part 2: Describe	Your Vehicles			
		report it on Schedule G: Executory Contracts and Unex	,	
□ No ■ Yes	ucks, tractors, sport utility	vehicles, motorcycles		
■ Yes			Do not deduct secured cl	laims or exemptions. Put
Yes 3.1 Make:	Hyundai Elantra	Who has an interest in the property? Check one	the amount of any secure	ed claims on Schedule D:
Yes 3.1 Make: Model:	Hyundai Elantra 2004	Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only	the amount of any secure	
Yes 3.1 Make: Model: Year: Approximat	Hyundai Elantra 2004 te mileage: 170000	Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Class	ed claims on Schedule D: ims Secured by Property.
Yes 3.1 Make: Model: Year:	Hyundai Elantra 2004 te mileage: 170000	Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only	the amount of any secure Creditors Who Have Clar Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
Yes 3.1 Make: Model: Year: Approximat	Hyundai Elantra 2004 te mileage: 170000	Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clar Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the
Yes 3.1 Make: Model: Year: Approximat Other inform	Hyundai Elantra 2004 te mileage: 170000	Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property	the amount of any secure Creditors Who Have Clai Current value of the entire property? \$895.00	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$895.00
Yes 3.1 Make: Model: Year: Approximat Other inform 3.2 Make:	Hyundai Elantra 2004 te mileage: 170000 mation:	Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions)	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$895.00 Do not deduct secured of the amount of any secure	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$895.00
Yes 3.1 Make: Model: Year: Approximat Other inform 3.2 Make: Model:	Hyundai Elantra 2004 te mileage: 170000 mation: Chevrolet Colorado 2006	Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$895.00 Do not deduct secured of the amount of any secure	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$895.00 laims or exemptions. Put ed claims on Schedule D:
3.1 Make: Model: Year: Approximat Other inform 3.2 Make: Model: Year: Approximat	Hyundai Elantra 2004 te mileage: 170000 mation: Chevrolet Colorado 2006 te mileage: 107498	Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	the amount of any secure Creditors Who Have Clai Current value of the entire property? \$895.00 Do not deduct secured of the amount of any secure Creditors Who Have Clai	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$895.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
3.1 Make: Model: Year: Approximat Other inform 3.2 Make: Model: Year: Approximat Other inform	Hyundai Elantra 2004 te mileage: 170000 mation: Chevrolet Colorado 2006 te mileage: 107498	Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only	the amount of any secure Creditors Who Have Clai Current value of the entire property? \$895.00 Do not deduct secured of the amount of any secure Creditors Who Have Clai Current value of the	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$895.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the portion you own?
3.1 Make: Model: Year: Approximat Other inform 3.2 Make: Model: Year: Approximat Other inform Thas not year 4. Watercraft, aii	Hyundai Elantra 2004 te mileage: 170000 mation: Chevrolet Colorado 2006 te mileage: 107498 mation: been driven for over 1 rcraft, motor homes, ATVs	Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property	the amount of any secure Creditors Who Have Clai Current value of the entire property? \$895.00 Do not deduct secured of the amount of any secure Creditors Who Have Clai Current value of the entire property? \$3,436.00	ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$895.00 laims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the

	btor 1 btor 2	Pagan,	Rich	ard Anthony & Pagan, Nicole Marie Case number (if known)	
				the portion you own for all of your entries from Part 2, including any entries for pages Part 2. Write that number here=>	\$4,331.00
Par	t 3: Des	scribe Your	Perso	nal and Household Items	
				egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
ı	<i>Exampl</i> e □ No		ppliand	urnishings ces, furniture, linens, china, kitchenware	
				Household Goods	\$2,500.00
ı	□No	s: Televisio	ng cell	d radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music colle phones, cameras, media players, games	ections; electronic devices
				Electronics	\$1,500.00
ı	Example No		s and to	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or nemorabilia, collectibles	r baseball card collections; other
I	Example □ No		photog ents	nd hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and	d kayaks; carpentry tools; musical
				Children's Toys	\$500.00
 	No Yes. Clothes Examp No	les: Pistols Describe	 lay clo	thes, furs, leather coats, designer wear, shoes, accessories Clothing	\$2,000.00
ı	□ No			relry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold Jewelry	, silver \$500.00
 	Examp ■ No □ Yes.	Describe	cats, b	oirds, horses d household items you did not already list, including any health aids you did not list	

	ebtor 1 ebtor 2	Pagan, Ri	ichard An	thony & Pagan, N	Nico	le Marie	Case number (if known)	
	☐ Yes.	Give specific	information					
15						including any entries for	pages you have attached for	\$7,000.00
Pa	art 4: De	escribe Your Fir	nancial Asset	ts				
De	o you ov	wn or have an	y legal or e	quitable interest in	any (of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No		•	ur wallet, in your hom		•	nand when you file your petition	
							Cash on Hand	\$3.00
17.	Exam _l		ns. If you ha			certificates of deposit; share the same institution, list ea Institution name:	es in credit unions, brokerage hous ach.	ses, and other similar
			17.1.	Checking Acco	ount	Mechanics Bank	1923	\$200.00
			17.2.	Checking Acco	ount	Mechanics Bank		\$100.00
			17.3.	Savings Accou	ınt	Mechanics Bank		\$100.00
18.				ly traded stocks int accounts with broken	kerag	e firms, money market acco	unts	
	_			Institution or issuer	nam	e:		
19.	•	ublicly traded venture	stock and	interests in incorpo	rated	d and unincorporated bus	inesses, including an interest i	n an LLC, partnership, and
		Give specific		about themme of entity:			% of ownership:	
20.	Negoti Non-n ■ No	iable instrumer	nts include puments are to	ersonal checks, cash hose you cannot tran	niers'	e and non-negotiable instruction checks, promissory notes, a consomeone by signing or de	and money orders.	
21.	Exam	ment or pensi ples: Interests			103(b)), thrift savings accounts, o	r other pension or profit-sharing p	olans
	■ No □ Yes.	List each acco		ely. of account:		Institution name:		
22.	Your s		sed deposits	you have made so the		ou may continue service or u utilities (electric, gas, water)	use from a company n, telecommunications companies	or others

■ No

Debtor 1 Debtor 2	Pagan, R	chard Anthony & Pagan, Nicole	Marie	Case number (if known)	
☐ Yes.			Institution name or individual:		
_	ties (A contrac	t for a periodic payment of money to you,	either for life or for a number of y	rears)	
■ No □ Yes.		Issuer name and description.			
		ation IRA, in an account in a qualified), 529A(b), and 529(b)(1).	ABLE program, or under a qua	alified state tuition program.	
		Institution name and description. Separ	ately file the records of any interes	sts.11 U.S.C. § 521(c):	
■ No	•	future interests in property (other that information about them	an anything listed in line 1), and	d rights or powers exercisab	le for your benefit
	•	trademarks, trade secrets, and other	intellectual property		
Exam ■ No	ples: Internet o	omain names, websites, proceeds from i		S	
	•	information about them			
		s, and other general intangibles permits, exclusive licenses, cooperative a	ssociation holdings, liquor license	es, professional licenses	
☐ Yes.	. Give specific	information about them			
Money or	property owe	d to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	funds owed to	you			
■ No □ Yes.	. Give specific	nformation about them, including whethe	r you already filed the returns and	I the tax years	
■ No		or lump sum alimony, spousal support,	child support, maintenance, divo	orce settlement, property settle	ement
		eone owes you	phility honofita, nick nav, vacction	nov. werkere' companyation	Social Socurity banafita
■ No		ages, disability insurance payments, disa pans you made to someone else	ability benefits, sick pay, vacation	pay, workers compensation,	social Security benefits,
☐ Yes.	Give specific	information			
	sts in insuran oples: Health, d	ce policies sability, or life insurance; health savings	account (HSA); credit, homeowne	er's, or renter's insurance	
	Name the insu	rance company of each policy and list its Company name:	s value. Benefic	iary:	Surrender or refund value:
If you	iterest in prop		Benefic ho has died		value:
If you died. No	iterest in prop	Company name: erty that is due you from someone will iary of a living trust, expect proceeds from	Benefic ho has died		value:
If you died. ■ No □ Yes.	aterest in prop are the benefic Give specific s against thire	Company name: erty that is due you from someone will iary of a living trust, expect proceeds from	Benefic ho has died m a life insurance policy, or are cu d a lawsuit or made a demand	urrently entitled to receive prope	value:
If you died. ■ No □ Yes. 33. Claims Exam ■ No	aterest in propare the benefice. Give specifices against third ples: Accidente. Describe each	Company name: erty that is due you from someone will interest a living trust, expect proceeds from information parties, whether or not you have file is, employment disputes, insurance claim the claim	Benefic ho has died m a life insurance policy, or are cu d a lawsuit or made a demand	urrently entitled to receive prope	value:

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Debto Debto	Dagan Dishard Anthony 9 Dagan Nicola Maria		Case number (if known)	
34. O t	her contingent and unliquidated claims of every nature, includ	ling counterclaims of	the debtor and rights to s	et off claims
_	Yes. Describe each claim			
	y financial assets you did not already list			
	No Yes. Give specific information			
	add the dollar value of all of your entries from Part 4, including Part 4. Write that number here		s you have attached for	\$403.00
Part 5:	Describe Any Business-Related Property You Own or Have an Inter	est In. List any real estat	te in Part 1.	
37. Do	you own or have any legal or equitable interest in any business-relate	ed property?		
■ N	o. Go to Part 6.			
ПΥ	es. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	t In.	
46. Do	you own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	ı Did Not List Above		
E	you have other property of any kind you did not already list? xamples: Season tickets, country club membership	•		
ш	Yes. Give specific information			
54. <i>A</i>	add the dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. F	Part 1: Total real estate, line 2			\$0.00
56. F	Part 2: Total vehicles, line 5	\$4,331.00		
57. F	art 3: Total personal and household items, line 15	\$7,000.00		
58. F	art 4: Total financial assets, line 36	\$403.00		
59. F	art 5: Total business-related property, line 45	\$0.00		
	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. F	eart 7: Total other property not listed, line 54 +	\$0.00		
62. T	otal personal property. Add lines 56 through 61	\$11,734.00	Copy personal property to	tal \$11,734.00
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			\$11,734.00

Vehicle Appraisal

Page 1 of 1



DATE: 3/22/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

VEHICLE INFORMATION:

YEAR: 2004 CONDITION: Average

MAKE: Hyundai **MILEAGE: 170000**

ZIP CODE: 94585 **MODEL:** Elantra

STYLE: GLS 4dr Sedan (2.0L 4cyl 4A)

OPTIONS:

RETAIL

TRADE IN

PRIVATE PARTY

Edmunds.com TMV®

\$1,688.00

\$420.00

\$895.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any options. (If no Zip Code was provided, this price is the national price.)

DATA PROVIDED BY



Vehicle Appraisal

Page 1 of 1



DATE: 3/22/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

VEHICLE INFORMATION:

YEAR: 2006 **CONDITION: Rough**

MAKE: Chevrolet **MILEAGE: 107498**

ZIP CODE: 94585 **MODEL:** Colorado

STYLE: LT 4dr Extended Cab SB (2.8L

4cyl 5M)

OPTIONS:

RETAIL

TRADE IN

PRIVATE PARTY

Edmunds.com TMV®

\$4,382.00

\$2,877.00

\$3,436.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any options. (If no Zip Code was provided, this price is the national price.)

DATA PROVIDED BY



Fill in this infor					
Debtor 1	Richard Anthony	[,] Pagan			
	First Name	Middle Name	Last Name)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F CALIFORNIA, SACRAMENTO		
Case number (if known)					Obselvit this is a
(II KIIOWII)					Check if this is a amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pá	art 1: Identify the Property You Claim as E	Exempt							
1.	Which set of exemptions are you claiming	? Check one only, even	if you	r spouse is filing with you.					
	You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	☐ You are claiming federal exemptions. 11 U	.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B	that you claim as exer	mpt, f	ill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
<u>D</u>	ebtor 1 Exemptions Hyundai Elantra 2004 170000 Line from Schedule A/B 3.1	\$895.00		\$895.00 100% of fair market value, up to any applicable statutory limit	CCCP § 703.140(b)(5)				
	Chevrolet	\$3,436.00		\$3,436.00	CCCP § 703.140(b)(2)				
	Colorado 2006 107498 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit					
	Household Goods Line from Schedule A/B 6.1	\$2,500.00		\$2,500.00	CCCP § 703.140(b)(3)				
	Line from Scriedule A/B. 0.1			100% of fair market value, up to any applicable statutory limit					
	Electronics Line from Schedule A/B 7.1	\$1,500.00		\$455.00	CCCP § 703.140(b)(5)				
	LINE HOLL SCHEUUIE PAD. 1.1			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemptio
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Electronics Line from Schedule A/B 7.1	\$1,500.00		\$1,045.00	CCCP § 703.140(b)(5)
Ellio II din donodale 7/B. 111			100% of fair market value, up to any applicable statutory limit	
Children's Toys Line from Schedule A/B 9.1	\$500.00	•	\$500.00	CCCP § 703.140(b)(3)
Line nom schedule A.L. 3.1			100% of fair market value, up to any applicable statutory limit	
Clothing Line from Schedule A/B: 11.1	\$2,000.00		\$2,000.00	CCCP § 703.140(b)(3)
Line Ironi Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit	
Jewelry Line from Schedule A/B 12.1	\$500.00		\$500.00	CCCP § 703.140(b)(4)
LINE HOTH SCHEUWE AVE. 12.1			100% of fair market value, up to any applicable statutory limit	
Cash on Hand Line from Schedule A/B 16.1	\$3.00		\$3.00	CCCP § 703.140(b)(5)
Elle Holli Genedale A/Z 10.1			100% of fair market value, up to any applicable statutory limit	
Mechanics Bank 1923 Line from Schedule A/B 17.1	\$200.00		\$200.00	CCCP § 703.140(b)(5)
Line IIOIII Schedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	
Mechanics Bank Line from Schedule A/B: 17.2	\$100.00		\$100.00	CCCP § 703.140(b)(5)
LINE HOTH SCHEAUIE A/B. 11.2			100% of fair market value, up to any applicable statutory limit	
Mechanics Bank Line from Schedule A/B 17.3	\$100.00		\$100.00	CCCP § 703.140(b)(5)
Elle Holli Geriedale 7/D. 11.9			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every 3 No	s years after that for case	s filed	, ,	
☐ Yes. Did you acquire the property covere☐ No☐ Yes	u by the exemption withir	1 1,21	o uays defore you filed this case?	

Fill in	this informa	ation to identify your o	ase:		
Debtor	r 1				7
		First Name	Middle Name	Last Name	}
Debtor (Spouse		Nicole Marie Pag	Middle Name	Last Name	
(орошоо	,9/	· iiot rtailio			
United	States Banl	kruptcy Court for the:	DIVISION	ALIFORNIA, SACRAMENTO	
Case r	number				
(if known	n)				☐ Check if this is an amended filing
Offic	cial For	m 106C			
Sch	nedule	C: The Pro	perty You Cla	aim as Exempt	12/15
property out and known). For eac specific applica funds—	y you listed o attach to this ch item of po c dollar amo able statutor may be un	n Schedule A/B: Prope spage as many copies of the property you claim as espent as exempt. Altern by limit. Some exemptilimited in dollar amou	rty (Official Form 106A/B) as yof Part 2: Additional Page as n exempt, you must specify the latively, you may claim the fons—such as those for heant. However, if you claim an	ogether, both are equally responsible for su our source, list the property that you claim a ecessary. On the top of any additional page e amount of the exemption you claim. Cull fair market value of the property bein the aids, rights to receive certain benefit exemption of 100% of fair market value ined to exceed that amount, your exem	as exempt. If more space is needed, fill is, write your name and case number (if one way of doing so is to state a neg exempted up to the amount of any is, and tax-exempt retirement under a law that limits the exemption
applica	ible statutor	ry amount.		mou to oxocou mut umoum, your oxom	silon nound be illiniou to the
Part 1		the Property You Cla		n if your spouse is filing with you.	
_				, ,	
	You are clair	ming state and federal n	onbankruptcy exemptions. 11	U.S.C. § 522(b)(3)	
	You are clair	ming federal exemptions	. 11 U.S.C. § 522(b)(2)		
2. Fo	r any prope	rty you list on <i>Schedu</i>	<i>lle A/B</i> that you claim as exe	empt, fill in the information below.	
		n of the property and line at lists this property	e on Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exemption.	
	or 2 Exem				
	ief descriptio ne from Sche				
				☐ 100% of fair market value, up to any applicable statutory limit	
	ubject to adju No	ustment on 4/01/16 and		es filed on or after the date of adjustment.) in 1,215 days before you filed this case?	
	☐ No				
	П Уос	,			

Official Form 106C

Fill in this inform						
Debtor 1 Richard Anthony Pagan						
	First Name	Middle Name	Last Name)	
Debtor 2	Nicole Marie Pag	an				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		EASTERN DISTRICT OF DIVISION	F CALIFORNIA, SACRAME	ENTO		
Case number (if known)						Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Eill	in this inform	action to identify your occ	.01					
		nation to identify your cas						
Deb	otor 1	Richard Anthony Pa	agan Middle Name	е	Last Name		}	
Deb	otor 2	Nicole Marie Pagan					ĺ	
(Spo	ouse if, filing)	First Name	Middle Name	е	Last Name			
Uni	ted States Bar		EASTERN DIS	STRICT OF CAL	IFORNIA, SACRAM	ENTO		
Cor	a number							
	se number _ nown)						☐ Chec	k if this is an
							amen	nded filing
~ · ·	–	4005/5						
	icial Form							4044
		/F: Creditors Wh						12/15
Sche D: Ci the C case	edule G: Execut reditors Who H Continuation Pa number (if kno	racts or unexpired leases that tory Contracts and Unexpired ave Claims Secured by Propage to this page. If you have sown). If of Your PRIORITY Unser	d Leases (Officia erty. If more spa no information t	al Form 106G). I ace is needed, c	Do not include any cree opy the Part you need	ditors with partially s , fill it out, number th	ecured claims that a e entries in the boxe	are listed in Schedule es on the left. Attach
		ors have priority unsecured c		ou?				
	☐ No. Go to Pa	art 2.						
	Yes.							
	identify what typ possible, list the	priority unsecured claims. If pe of claim it is. If a claim has be e claims in alphabetical order a one creditor holds a particular of	oth priority and r	nonpriority amour creditor 's name. I	nts, list that claim here a f you have more than tw	nd show both priority a	and nonpriority amour	nts. As much as
	(For an explana	ation of each type of claim, see	the instructions f	for this form in the	e instruction booklet.)			
						Total claim	Priority amount	Nonpriority amount
2.1	Internal	Revenue Service	Last 4	4 digits of accou	ınt number	\$9,500.00		
		editor's Name						
	DO D	70.40	When	n was the debt ir	ncurred?		_	
	PO Box	7346 Iphia, PA 19101-7346						
		treet City State Zlp Code	As of	f the date you file	e, the claim is: Check a	all that apply		
	Who incurred	d the debt? Check one.	□ co	ontingent				
	Debtor 1 o	only	□ Ur	nliquidated				
	Debtor 2 o	only	_	isputed				
	Debtor 1 a	and Debtor 2 only		of PRIORITY un	secured claim:			
	_	· ·		omestic support of				
	_	ne of the debtors and another	=-					
		his claim is for a community	uebi		other debts you owe the	0		
		subject to offset?	_		personal injury while yo	ou were intoxicated		
	■ No		⊔ Ot	ther. Specify				_
	☐ Yes							
Par	t 2: List Al	I of Your NONPRIORITY U	Insecured Cla	aims				
3.	Do any credito	ors have nonpriority unsecure	ed claims agains	st you?				
	□ No. You hav	ve nothing to report in this part.	Submit this form	n to the court with	vour other schedules.			
	Yes.	and participation and participation			y : 23.12. 33.1344.30.			
	unsecured clain	nonpriority unsecured claim n, list the creditor separately fo or holds a particular claim, list t	r each claim. For	r each claim listed	d, identify what type of c	laim it is. Do not list cla	aims already included	I in Part 1. If more
							То	tal claim

Total claim

Debto Debto	r 1 Pagan, Richard Anthony & Pagan, I	Nicole Marie	Case number (f know)			
4.1	Nonpriority Creditor's Name		7470	\$240.00		
	Nonpholity Orealton's Name	When was the debt incurred?				
	PO Box 3427 Bloomington, IL 61702-3427 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify				
4.2	CBA Collection Bureau Nonpriority Creditor's Name	Last 4 digits of account number	4228	\$2,211.69		
	Nonpriority Creditor's Name	When was the debt incurred?				
	25954 Eden Landing Rd # 15667629 Hayward, CA 94545-3816			•		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharin				
		_				
	☐ Yes	Other. Specify				
4.3	Credit Bureau Associates Nonpriority Creditor's Name	Last 4 digits of account number	0090	\$2,242.00		
	Nonpholity Orealtor 3 Name	When was the debt incurred?				
	PO Box 150460 Fairfield, CA 94533-0150					
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one. ☐ Debtor 1 only	_				
		☐ Contingent				
	Debtor 2 only	Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed	d alaba.			
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	з стант:			
	Check if this claim is for a community debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharin	a plans, and other similar debta			
	■ No	_	א פו שוים, מווע טנוופו אווווומו טפטנא			
	Yes	Other. Specify				

Debto	Pagan, Richard Anthony & Pagan,	, NICOIE Marie Case number (if know)	
4.4	Discover Financial Services, LLC Nonpriority Creditor's Name	Last 4 digits of account number 4622	\$9,998.57
	PO Box 15316 Wilmington, DE 19850-5316 Number Street City State Zlp Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Lawsuit FCM148794	
4.5	DSNB/Macy's Nonpriority Creditor's Name	Last 4 digits of account number 4443	\$2,000.00
	PO Box 8218	When was the debt incurred?	
	Mason, OH 45040-8218 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Estate Information Services, LLC	Last 4 digits of account number 8349	\$12,132.66
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 1730 Reynoldsburg, OH 43068-8730 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneok all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
		<u> </u>	
	Yes	Other. Specify	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Debtor 2 Pagan, Richard Anthony & Pagan	gan, Nicole Marie	Case number (f know)
Name and Address Department of Justice Tax Division Ben Franklin Station PO Box 683 Washington, DC 20044-0683	On which entry in Part 1 or Part 2 d Line 2.1 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Suttell, Hammer & White Attorney for Discover Bank PO Box C-90005 Bellevue, WA 98009	On which entry in Part 1 or Part 2 d Line 4.4 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 4622
Name and Address Universal Card/Citibank PO Box 6241 Sioux Falls, SD 57117-6241	On which entry in Part 1 or Part 2 d Line 4.6 of (Check one): Last 4 digits of account number	id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 8349
Name and Address US Attorney (For IRS) 501 I St Ste 10-100 Sacramento, CA 95814-7300	On which entry in Part 1 or Part 2 did you list the original creditor? Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 9,500.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 9,500.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 28,824.92
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 28,824.92

Fill in this inforr					
Debtor 1	Richard Anthony				
	First Name	Middle Name	Last Name		
Debtor 2	Nicole Marie Pag	an			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F CALIFORNIA, SACRAMENTO		
Case number					
(if known)					Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Numbe	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Ivallie				
	Number	Street			_
	Number	Street			
					<u> </u>
	City		State	ZIP Code	
2.2					
	Name				_
	ivame				
		- ·			<u> </u>
	Number	Street			
	City		State	ZIP Code	
2.3					
2.5					_
	Name				
					_
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
2.4					_
	Name				
					<u>_</u>
	Number	Street			
	City		State	ZIP Code	_
2.5	Oity		Ciaio	211 0000	
2.5					_
	Name				
					<u></u>
	Number	Street			
	City		State	ZIP Code	_
	City		State	ZIF Code	

Official Form 106G

Fill in this inf	formation to identify your	2000			
	formation to identify your				
Debtor 1	Richard Anthony First Name	Pagan Middle Name	Last Name		
Debtor 2	Nicole Marie Pag	an		[
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF C	CALIFORNIA, SACRA	MENTO	
Case number					
(if known)					Check if this is an amended filing
Official F	Form 106H				
Schedu	le H: Your Cod	ebtors			12/15
are filing toge and number t	ther, both are equally resp	onsible for supplying corre the left. Attach the Addition	ct information. If mo	re space is needed, cop	as possible. If two married people by the Additional Page, fill it out, tional Pages, write your name and
1. Do you	u have any codebtors? (If y	ou are filing a joint case, do no	ot list either spouse as	a codebtor.	
■ No □ Yes					
		lived in a community prope New Mexico, Puerto Rico, Te			tates and territories include Arizona,
п с			•		
_	to line 3.				
■ Yes. D	nd your spouse, former spous	se, or legal equivalent live with	you at the time?		
	No Yes.				
	res.				
	In which community state	or territory did you live?	-NONE-	. Fill in the name and	d current address of that person.
	Name of your spouse, former sp Number, Street, City, State & Zip				
line 2 aga	n 1, list all of your codebto ain as a codebtor only if th chedule E/F (Official Form	ors. Do not include your spo at person is a guarantor or o	cosigner. Make sure	you have listed the cre	ith you. List the person shown in ditor on Schedule D (Official Form E/F, or Schedule G to fill out
	lumn 1: Your codebtor ne, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	litor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
Nar	me			□ Schedule E/F, lir	
				☐ Schedule G, line	
Nur	mber Street			_	
City	/	State	ZIP Code		
3.2				□ Schodulo D. line	
Nar	me			_ ☐ Schedule D, line☐ Schedule E/F, lir	
				☐ Schedule G, line	
Nur	mber Street			_	
City		State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com Schedule H: Your Codebtors

Fill in this information to	o identify your case:			
Debtor 1	Richard Anthony Pag	gan		
Debtor 2 (Spouse, if filing)	Nicole Marie Pagan			
United States Bankrupt	,	RN DISTRICT OF CALIFORNIA, AMENTO DIVISION		
Case number (lf known)				Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter 13
Official Form	1061			income as of the following date:

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ☐ Not employed ■ Not employed information about additional employers. Occupation **Appliance Tech Back Office / Receptionist** Include part-time, seasonal, or Employer's name **Precision Services** self-employed work. Solano Eye Care Occupation may include student or Employer's address 2820 Broadmoor Ave 1329 Oliver Rd homemaker, if it applies. Concord, CA 94520-4717 Fairfield, CA 94534-3470 How long employed there? 8 months 1 years

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or For Debtor 1 non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 1.573.38 3.774.23 2. 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 3. Calculate gross Income. Add line 2 + line 3. 3,774.23 1,573.38

Official Form 106I Schedule I: Your Income page 1

	_		_		,			
				For	Debtor 1	For Debto		
	Сору	line 4 here	4.	\$	3,774.23		,573.38	
5.	List a	all payroll deductions:						
	5a. 5b. 5c. 5d.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans	5a. 5b. 5c. 5d.	\$ \$ \$	569.72 0.00 0.00 0.00	\$ \$ \$	0.00 0.00 0.00	
	5e. 5f. 5g. 5h.	Insurance Domestic support obligations Union dues Other deductions. Specify:	5e. 5f. 5g. 5h.+	\$ 	0.00 0.00 0.00 0.00	\$ \$ \$ + \$	0.00 0.00 0.00 0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	569.72	\$	155.75	
7. 8.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,204.51	\$1	,417.63	
	8a.	Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive	8b.	\$	0.00	\$	0.00	
	8d.	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	8c. 8d.	\$	0.00	\$ 	0.00	
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental	8e.	\$	0.00	\$	0.00	
		Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g. 8h.	Pension or retirement income Other monthly income. Specify:	8g. 8h.+	\$	0.00	\$ + \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.		ulate monthly income. Add line 7 + line 9. he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	+ \$_	1,417.63	= \$	4,622.14
11.	Includ	all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your defriends or relatives. It include any amounts already included in lines 2-10 or amounts that are not availity: Mother-in-Law's Contribution	ependen				+\$	200.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					\$	4,822.14
13.	Do y	ou expect an increase or decrease within the year after you file this form? No.	?				monthly	

Official Form 106I Schedule I: Your Income

Fill is	n this inform	ation to identify yo	ur case:			1		
Debto				70 N		Cho	eck if this is:	
Dobito	01 1	Richard Ant	nony Pa	jan	-		An amended filing	
Debto (Spou	or 2 use, if filing)	Nicole Marie	Pagan				A supplement show expenses as of the	ring postpetition chapter 13 following date:
Unite	d States Bank	cruptcy Court for the		RN DISTRICT OF CALIFO MENTO DIVISION	RNIA,		MM / DD / YYYY	
Case (If kno	numberown)							
		orm 106J				•		
Sc	hedule	J: Your I	Expen	ses				12/1:
infor (if kr	rmation. If n	nore space is nee wer every question	eded, attac on.	If two married people are th another sheet to this fo				supplying correct ur name and case numbe
Part 1.	1: Desc	ribe Your House	hold					
	□ No. Go t							
	Yes. Do	es Debtor 2 live i	n a separa	te household?				
	■ ı		st file Offici	al Form 106J-2, <i>Expenses</i> i	for Separate Househ	oldof Debto	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list I Debtor 2.	Debtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		5	□ No ■ Yes
					Daughter		2	□ No ■ Yes
							_	□ No □ Yes
								□ No
	expenses of	penses include of people other the nd your depende	an	No Yes			_	☐ Yes
expe	mate your e	a date after the b	ur bankru	y Expenses ptcy filing date unless yo is filed. If this is a suppl				
valu		ssistance and ha		overnment assistance if d it on Schedule I: Your I			Your exp	enses
		or home ownersl		ses for your residence. In lot.	clude first mortgage	4.	\$	1,700.00
	If not inclu	ded in line 4:						
						40	c	0.00
		estate taxes erty, homeowner's	or renter's	insurance		4a. 4b.	·	0.00
		e maintenance, re				4c.		0.00
		eowner's associati				4d.		0.00
5.	Additional	mortgage payme	nts for yo	ur residence, such as hon	ne equity loans	5.	\$	0.00

Official Form 106J Schedule J: Your Expenses page 1

Utilities: 6a. Electricity, heat, natural gas			
oa. Electricity, fieat, fiaturai gas	6a.	\$	200.00
6b. Water, sewer, garbage collection	6b.	•	300.00
6b. Water, sewer, garbage collection6c. Telephone, cell phone, Internet, satellite, and cable services		\$	160.00 350.00
6d. Other. Specify:	6c.	·	
. ,	6d.	\$	0.00
Food and housekeeping supplies	7.	\$	1,100.00
Childcare and children's education costs	8.	\$	25.00
Clothing, laundry, and dry cleaning	9.	·	200.00
Personal care products and services	10.	\$	150.00
Medical and dental expenses	11.	\$	75.00
Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	300.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00
Charitable contributions and religious donations	14.	·	0.00
Insurance.		Ŧ	0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	250.00
15c. Vehicle insurance	15c.	\$	60.00
15d. Other insurance. Specify:	15d.	\$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	16.	\$	0.00
Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	0.00
17b. Car payments for Vehicle 2	17b.	\$	0.00
17c. Other. Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	0.00
Your payments of alimony, maintenance, and support that you did not report as		<u> </u>	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
Other payments you make to support others who do not live with you.	40	\$	0.00
Specify:Other real property expenses not included in lines 4 or 5 of this form or on <i>Schedu</i>	19.	ır İncomo	
20a. Mortgages on other property	ui e i: 10u 20a.		0.00
20b. Real estate taxes	20a.		0.00
20c. Property, homeowner's, or renter's insurance	20b. 20c.	·	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
20e. Homeowner's association or condominium dues	20u. 20e.	·	0.00
		+\$	37.50
Other: Specify: Auto Registration			37.30
Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	4,907.50
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,907.50
Calculate your monthly not income			
Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4 022 44
23b. Copy your monthly expenses from line 22c above.	23a. 23b.	·	4,822.14 4,907.50
200. Copy your monthly expenses normine 220 above.	۷۵۵.	-φ	4,907.50
23c. Subtract your monthly expenses from your monthly income.			
The result is your <i>monthly net income</i> .	23c.	\$	-85.36
Do you expect an increase or decrease in your expenses within the year after you			
For example, do you expect to finish paying for your car loan within the year or do you expect your	mortgage p	payment to increase	e or decrease because of

■ Yes. Explain here: Joint Debtor's Mother lives with Debtors. Her expenses are included above.

Fill in this infor	mation to identify your	case:			
Debtor 1	Richard Anthony	[,] Pagan			
	First Name	Middle Name	Last Name		
Debtor 2	Nicole Marie Pag	an			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	PF CALIFORNIA, SACRAMEN	то	
0 1					
Case number _					Charle if this is
(II KIIOWII)					☐ Check if this i
					amended f

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below								
Did y	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?								
	No								
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)							
X S	nenalty of periury I declare that I have read the summary and st. Killiand Pagan 36D1E17BF791447 Ichard Anthony Pagan ignature of Debtor 1 3/31/2016	Micole Marie Pagan Signature of Debtor 2 3/31/2016							
D	ate	Date							

AFNI, Inc PO Box 3427 Bloomington, IL 61702-3427

CBA Collection Bureau 25954 Eden Landing Rd # 15667629 Hayward, CA 94545-3816

Credit Bureau Associates PO Box 150460 Fairfield, CA 94533-0150

Department of Justice Tax Division Ben Franklin Station PO Box 683 Washington, DC 20044-0683

Discover Financial Services, LLC PO Box 15316 Wilmington, DE 19850-5316

DSNB/Macy's PO Box 8218 Mason, OH 45040-8218

Estate Information Services, LLC PO Box 1730 Reynoldsburg, OH 43068-8730

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Suttell, Hammer & White Attorney for Discover Bank PO Box C-90005 Bellevue, WA 98009

Universal Card/Citibank PO Box 6241 Sioux Falls, SD 57117-6241

US Attorney (For IRS) 501 I St Ste 10-100 Sacramento, CA 95814-7300

	Lin this inform							
		nation to identify your						
De	ebtor 1	Richard Anthon First Name	y Pagan Middle Name		_ast Name			
De	ebtor 2	Nicole Marie Pa	gan					
(Sp	ouse if, filing)	First Name	Middle Name	l	ast Name			
Un	ited States Bar	nkruptcy Court for the:	EASTERN DISTRICT OF DIVISION	CALIFO	RNIA, SACRAMEN	ТО		
	nse number						_	eck if this is an nended filing
St	as complete a	of Financial	Affairs for Individuelle. If two married people and attach a separate sheet to the second sec	re filing t	ogether, both are e	equally responsible		
(if k	known). Answe	er every question.	rital Status and Where You				, , , , , , , , , , , , , , , , , , , ,	
Га	rt 1: Give D	etalis About Tour Ma	ntai Status and Where You	Liveu b	eiore			
1.	■ Married □ Not mar							
2.	□ No	ist 3 years, have you	ived anywhere other than	where yo	ou live now?			
	Yes. List	t all of the places you liv	ed in the last 3 years. Do not	include v	here you live now.			
	Debtor 1 Pri	or Address:	Dates Debtor 1 there	lived	Debtor 2 Prior Ad	ddress:		Dates Debtor 2 lived there
	716 Alham Crockett, (nbra St CA 94525-1210	From-To: 2/2011 - 10/2 0	014	Same as Debtor	1		Same as Debtor 1 From-To:
	tes and territorie No Yes. Mai	es include Arizona, Cal	er live with a spouse or leg fornia, Idaho, Louisiana, Nev edule H: Your Codebtors (Off	vada, Ne	w Mexico, Puerto Ri			
4.	Fill in the tota	I amount of income you	ployment or from operating a received from all jobs and a save income that you receive to	all busine	sses, including part-	time activities.	us calenda	r years?
	Yes. Fill	in the details.						
			Debtor 1			Debtor 2		
			Sources of income	Gros	s income	Sources of incor	ne	Gross income
			Check all that apply.	(befo	re deductions and sions)	Check all that app		(before deductions and exclusions)

Official Form 107

Debtor 1 Debtor 2 Pagan, Richard Anthor	ny & Pagan, Nicole Marie	Case	e number (if known)	
	Debtor 1 Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$9,186.58	☐ Wages, commissions, bonuses, tips	\$3,779.83
	☐ Operating a business		☐ Operating a business	
For last calendar year: (January 1 to December 31, 2015)	■ Wages, commissions, bonuses, tips	\$26,515.00	■ Wages, commissions, bonuses, tips	\$14,135.00
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2014)	■ Wages, commissions, bonuses, tips	\$7,606.00	☐ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		Operating a business	
□ No ■ Yes. Fill in the details.	Debtor 1 Sources of income Describe below	Gross income (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	2016 - Tax Refund from 2015 Tax Return Fed: \$2,115 State: \$594	\$2,709.00		
For last calendar year: (January 1 to December 31, 2015)	2015 Pension (Joint)	\$8,290.00		
For the calendar year before that: (January 1 to December 31, 2014)	2014 401K Cash Out	\$120,000.00		
	2014 Unemployment	\$2,896.00		
Part 3: List Certain Payments You	Made Before You Filed for B	ankruntov		
6. Are either Debtor 1's or Debtor 2' ☐ No. Neither Debtor 1 nor D		debts? ner debts. Consumer debts a	are defined in 11 U.S.C. § 101(8) as "incurred by an
☐ No. Go to line 7 ☐ Yes List below 6	re you filed for bankruptcy, did y 7. each creditor to whom you paid a o not include payments for dom	a total of \$6,225* or more in o	ne or more payments and the t	
payments to	o an attorney for this bankruptcy on 4/01/16 and every 3 years a	/ case.		

Official Form 107

	otor 1 otor 2	agan, Rich	ard Anthony & Pag	an, Nicole Marie	Cas	se number (if known)		
	■ Yes.			e primarily consumer del for bankruptcy, did you pay		\$600 or more?		
		No.	Go to line 7.	roi bariitaptoy, ala you pay	any organion a total of	Que de more.		
		☐ Yes		or to whom you paid a total o				
	Creditor	's Name and	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	Insiders in which you business y	clude your re are an office you operate a	elatives; any general part er, director, person in con as a sole proprietor. 11 U	ey, did you make a paymeners; relatives of any generator, or owner of 20% or mo.S.C. § 101. Include payme	al partners; partnershi ore of their voting secu	ps of which you ar irities; and any mai	e a general part naging agent, in	ner; corporations of cluding one for a
		Name and	nents to an insider Address	Dates of payment	Total amount	Amount you	Reason for	this payment
					paid	still owe		
8.	insider? Include pa	lyments on d	lebts guaranteed or cosig	ey, did you make any pay	ments of transfer at	iy property on ac	count of a dec	it tilat bellented all
		Name and		Dates of payment	Total amount	Amount you	Reason for	this payment
Par	t 4: Ide	ntify I egal /	Actions, Repossession	s and Foreclosures	paid	still owe	include cred	itor's name
9.	Within 1 y List all suc and contra	ear before	you filed for bankrupto ncluding personal injury o	ey, were you a party in an asses, small claims actions,				
	Case title			Nature of the case	Court or agency		Status of th	e case
		er Bank vs y Pagan 8794	s. Richard	Breach of Contract	Superior Court California 580 Texas St Fairfield, CA 9		Pending On appe Conclude	al
10.			you filed for bankruptond fill in the details below	cy, was any of your prope	erty repossessed, fo	reclosed, garnisł	ned, attached,	seized, or levied?
	■ No □ Yes.	Fill in the inf	ormation below.					
	Creditor	Name and A	Address	Describe the Property Explain what happened	d	Date		Value of the property
11.	accounts No		o make a payment beca	tcy, did any creditor, incl ause you owed a debt?	luding a bank or fina	ancial institution,	set off any am	ounts from your
	Creditor	Name and	Address	Describe the action the	e creditor took	Date take	action was	Amount

Official Form 107

	btor 1 btor 2 Pagan, Richard Anthony & Pagan,	Nicole Marie Case number	(if known)	
12.	Within 1 year before you filed for bankruptcy, w court-appointed receiver, a custodian, or anoth ■ No □ Yes	vas any of your property in the possession of an as er official?	ssignee for the benefit	of creditors, a
Pai	rt 5: List Certain Gifts and Contributions			
		did you give any gifts with a total value of more tha	an \$600 per person?	
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankruptcy, ■ No □ Yes. Fill in the details for each gift or contribution	did you give any gifts or contributions with a total on.	value of more than \$6	00 to any charity
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses			
	or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe the property you lost and including insurations.	r since you filed for bankruptcy, did you lose anyth ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	rt 7: List Certain Payments or Transfers			
16.	consulted about seeking bankruptcy or prepari	, or credit counseling agencies for services required in	your bankruptcy.	to anyone you Amount of
	Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	payment
	Bankruptcy Law Group, PC 1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923	Attorney Fee: \$900, \$600 balance will be paid post-filing Court Fee: \$335		\$1,235.00
17.	Within 1 year before you filed for bankruptcy, d promised to help you deal with your creditors of Do not include any payment or transfer that you listed No Yes. Fill in the details.		transfer any property	to anyone who
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankruptcy.	did you sell, trade, or otherwise transfer any prope	erty to anyone, other t	han property

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy
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page 4

	Pagan, Richard Anthony & Pag	an, Nicole Marie		Case numb	DET (if known)	
	transferred in the ordinary course of your land land both outright transfers and transfers magifts and transfers that you have already listed to land land land land land land land land	ade as security (such as the		curity interes	st or mortgage on your pro	operty). Do not include
	Person Who Received Transfer Address	Description and v property transfer		payme	be any property or nts received or debts exchange	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		y property to a s	self-settled	trust or similar device o	of which you are a
	Name of trust	Description and v	alue of the prop	erty transfe	erred	Date Transfer was made
	Deliver of Contain Financial Accounts to	atmonanta Oafa Dan aa't	D 1 04			maac
Pai	t 8: List of Certain Financial Accounts, In	struments, Safe Deposit	Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso ■ No □ Yes. Fill in the details.	or other financial account	ts; certificates o			, ,
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, any	safe depo	sit box or other deposi	tory for securities,
	No					
	Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S and ZIP Code)		Describe t	he contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than your	home within 1 y	ear before	you filed for bankruptc	у
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S and ZIP Code)		Describe t	he contents	Do you still have it?
Pai	t 9: Identify Property You Hold or Contro	I for Someone Else				
23.	Do you hold or control any property that so someone.		de any property	you borro	wed from, are storing fo	or, or hold in trust for
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe t	he property	Value
Pai	t 10: Give Details About Environmental Inf	ormation				
For	the purpose of Part 10, the following definiti	ons apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

	otor 1 otor 2	Pagan, Richard Anthony & Pag	gan, Nicole Marie	C	ase number(if known)	
•	Site mown, of Hazar mater	operate, or utilize it, including dispos rdous material means anything an en rial, pollutant, contaminant, or similar	ty as defined under any environmental sal sites. vironmental law defines as a hazardous term.	was	ste, hazardous substance, toxic sul	
кер	ort all	notices, releases, and proceedings to	nat you know about, regardless of when	they	y occurred.	
24.	I	ny governmental unit notified you th No Yes. Fill in the details.	at you may be liable or potentially liable	und	der or in violation of an environmer	ntal law?
		e of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice
25.	I	No	of any release of hazardous material?			
	Name	Yes. Fill in the details. ne of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	nd	Environmental law, if you know it	Date of notice
26.	I	you been a party in any judicial or ac No Yes. Fill in the details.	dministrative proceeding under any env	ironr	mental law? Include settlements an	d orders.
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	N	ature of the case	Status of the case
Par	t 11:	Give Details About Your Business o	r Connections to Any Business			
27.	Withir	n 4 years before you filed for bankru	otcy, did you own a business or have ar	y of	the following connections to any b	ousiness?
		■ A sole proprietor or self-employed	in a trade, profession, or other activity,	eith	er full-time or part-time	
			pany (LLC) or limited liability partnersh			
	[☐ A partner in a partnership				
	[☐ An officer, director, or managing e	xecutive of a corporation			
	[☐ An owner of at least 5% of the voti	ng or equity securities of a corporation			
		No. None of the above applies. Go to	Part 12.			
	= \	Yes. Check all that apply above and f	ill in the details below for each business	; <u>.</u>		
		iness Name	Describe the nature of the business		Employer Identification number	
	Addr (Numb	ress ber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security I	number or ITIN.
	Rich	hard and Nicole Pagan	Direct Sales - Health Realted items, Household items, etc Affiliated through Amway Debtors attempted this in 2012 but were unable to make it successful. Shortly thereafter, they stopped attempting to sell items. However, they are still active through Amway. No transactions occurring.		EIN: From-To 2012-Current	

	otor 1 otor 2 Pagan, Richard Anthony & Paga	nn, Nicole Marie	Case number (if known)
28.	institutions, creditors, or other parties.	cy, did you give a financial statement to	anyone about your business? Include all financial
	Yes. Fill in the details below. Name Address (Number, Street, City, State and ZIP Code)	Date Issued	
Par	t 12: Sign Below		
Sig	and correct. I understand that making a false ruptcy case can result in fines up to \$250,00 519, and 3571. CLAY L PAGAL 36601=17BF791447, agan nature of Debtor 1 3/31/2016	e statement, concealing property, or obtained by: McLe Marie Pagan 65CBA0000AFDE4A0 Nicole Marie Pagan Signature of Debtor 2 3/31/2016 Date	I declare under penalty of perjury that the answers are taining money or property by fraud in connection with a probability by the state of the stat
■ N	lo	nt of Fillancial Allans for Individuals Fil	ing for Bankrupicy (Official Form 107):
■ N	•	, ,,	
\mathbf{L}	es. Name of Person . Attach the Bankrup	otcy Petition Preparer's Notice, Declaration	, and Signature (Official Form 119).

Fill in this information to identify your case:						
Debtor 1 Richard Anthony Pagan						
Debtor 2 (Spouse, if filing)	Nicole Marie Pagan					
United States B	ankruptcy Court for the:	Eastern District of California, Sacramento Division				
Case number (if known)						

Check one box only as	directed	in this	form	and ir	Form
122A-1Supp:					

- 1. There is no presumption of abuse
- 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

Debtor 2 or

☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
 - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Dobtor 1

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

		Det	otor 1		or 2 or filing spouse
Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).	and commissio	ons (before all \$	3,739.25	\$	1,573.38
 Alimony and maintenance payments. Do not include p Column B is filled in. 	payments from	a spouse if \$	0.00	\$	0.00
4. All amounts from any source which are regularly pai of you or your dependents, including child support. from an unmarried partner, members of your household, y roommates. Include regular contributions from a spouse Do not include payments you listed on line 3	Include regular your dependents e only if Column	contributions s, parents, and	200.00	\$	0.00
5. Net income from operating a business, profession, o		btor 1			
Gross receipts (before all deductions) Ordinary and necessary operating expenses Net monthly income from a business, profession, or farr	\$ 0.00 -\$ 0.00	-	0.00	\$	0.00
6. Net income from rental and other real property	_				
		btor 1			
Gross receipts (before all deductions)	\$ 0.00	_			
Ordinary and necessary operating expenses	-\$ 0.00	=		_	
Net monthly income from rental or other real property	\$ 0.00	Copy here -> \$ _	0.00	\$	0.00
7. Interest, dividends, and royalties		\$	0.00	\$	0.00

Official Form 122A-1

Debtor 1 Pagan, Richard Anthony & Pagan, Nicole Marie Case number (if known) Debtor 2 Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse \$ 0.00 Pension or retirement income. Do not include any amount received that was a benefit 0.00 0.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 3.939.25 1.573.38 5.512.63 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 5,512.63 Multiply by 12 (the number of months in a year) x 12 66,151.56 12b. The result is your annual income for this part of the form 12h 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. CA 5 Fill in the number of people in your household. 89,840.00 Fill in the median family income for your state and size of household. 13 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy cleix office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 17, here is no presumption of abuse. 14a. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below DocuSigned by: Βv er penalty of perjury that the information on this is true and correct. icliand Pagan Icole Marie Pagan

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Date

Signature of Debtor 1

MM / DD / YYYY

Fill in this infor	mation to identify your case:		
Debtor 1			
DODIOI	Richard Anthony Pagan		
Dahtan		Name Last Name	
Debtor 2 (Spouse if, filing)	Nicole Marie Pagan First Name Middle	Name Last Name	
, ,	FACTER	L DIOTRIOT OF CALLED DAILA CARD AMENTO	
United States Ba	ankruptcy Court for the: EASTERN DIVISION	I DISTRICT OF CALIFORNIA, SACRAMENTO	
Case number			
(if known)			☐ Check if this is an
			amended filing
Official Fo	orm 100		
Stateme	nt of Intention for I	ndividuals Filing Under Chapter	r 7 12/15
f vou are an ind	lividual filing under chapter 7, you m	aust fill out this form if:	
	ve claims secured by your property,		
	sed personal property and the lease		
		s after you file your bankruptcy petition or by the date set for	
wnich the for	The state of the s	nds the time for cause. You must also send copies to the cre	ditors and lessors you list on
tile ioi			
		se, both are equally responsible for supplying correct inform	ation. Both debtors must sign
and da	ate the form.		
Re as complete	and accurate as nossible. If more sn	pace is needed, attach a separate sheet to this form. On the to	on of any additional pages
	our name and case number (if know		op of any additional pages,
		VN).	
	•	vn).	
Part 1: List Y	our Creditors Who Have Secured C		
<u>'</u>	our Creditors Who Have Secured C	laims	
•	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Sche		icial Form 106D), fill in the
1. For any credit	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Sche	laims dule D: Creditors Who Have Claims Secured by Property (Off ral What do you intend to do with the property that	Did you claim the property
1. For any credit	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow.	laims dule D: Creditors Who Have Claims Secured by Property (Off	
For any credit information b	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow.	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
1. For any credit information b Identify the co	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow.	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt?	Did you claim the property
1. For any credit information b Identify the co	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow.	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it.	Did you claim the property as exempt on Schedule C?
1. For any credit information b Identify the co	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
1. For any credit information b Identify the co	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	Did you claim the property as exempt on Schedule C?
1. For any credit information b Identify the concept of the concep	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation	Did you claim the property as exempt on Schedule C?
1. For any credit information b Identify the concept of the concep	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	Did you claim the property as exempt on Schedule C?
1. For any credit information b Identify the concept of the concep	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	Did you claim the property as exempt on Schedule C? No Yes
1. For any credit information b Identify the concentration of the concen	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	Did you claim the property as exempt on Schedule C?
1. For any credit information b Identify the concentration of the concen	Your Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it.	Did you claim the property as exempt on Schedule C? No Yes
1. For any credit information b Identify the concentration of the concen	four Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	Did you claim the property as exempt on Schedule C? No Yes
1. For any credit information b Identify the concentration of the concen	four Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property. Retain the property and redeem it. Retain the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Reaffirmation	Did you claim the property as exempt on Schedule C? No Yes
1. For any credit information b Identify the concentration of the concen	four Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	Did you claim the property as exempt on Schedule C? No Yes
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1. For any credit information b Identify the control of Identify the Creditor's name: Description of Identify the Control of Identification (Identify the Control of Identify the Control of Identification (Identify the Control of Identify the Control of Identification (Identify the Control of Identification (Identify the Control of Identification (Identify the Identification (Identify the Identification (Identification (Identi	four Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.	Did you claim the property as exempt on Schedule C? No Yes
1. For any credit information b Identify the control of Identify the Creditor's name: Description of Identify the Identify the Control of Identify the Identification th	four Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and lexplain]:	Did you claim the property as exempt on Schedule C? No Yes No Yes
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1. For any credit information b Identify the collection of property securing debt Creditor's name: Description of property securing debt Creditor's name: Description of property securing debt Creditor's	four Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	Did you claim the property as exempt on Schedule C? No Yes No Yes
1. For any creditinformation bidentify the collection of property securing debt Creditor's name: Description of property securing debt Creditor's name: Description of property securing debt Creditor's name: Description of property securing debt	f our Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and lexplain]: Surrender the property and lexplain]: Surrender the property and redeem it. Retain the property and redeem it.	Did you claim the property as exempt on Schedule C? No Yes No Yes
1. For any creditinformation be Identify the control of Identify the Identify the Control of Identify the Identification of Identify the Identification of Identif	f our Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property and [explain]:	Did you claim the property as exempt on Schedule C? No Yes No Yes
1. For any creditinformation be Identify the control of Identify the Identify the Control of Identify the Identification of Id	f our Creditors Who Have Secured Cotors that you listed in Part 1 of Schelelow. reditor and the property that is collate	dule D: Creditors Who Have Claims Secured by Property (Official What do you intend to do with the property that secures a debt? Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Surrender the property and [explain]:	Did you claim the property as exempt on Schedule C? No Yes No Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Debtor 2 Pagan, Richard Anthony & Pagan, Nicol	e Marie Case number (if known)	
name: Description of property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed the information below. Do not list real estate leases. Unexp may assume an unexpired personal property lease if the tr	pired leases are leases that are still in effect; the leas	
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No
Part 3: Sign Below Under penalty of periury. I declare that I have indicated my	vintention about any property of my actate that secu	res a debt and any personal
x Signature of Debtor 1 Date Unexpired lease. unexpired lease. unexpired lease. support of pagen and pagen beconsided by: unexpired lease. and pagen and pagen and pagen beconsided by: unexpired lease. and pagen and pagen beconsided by: unexpired lease. and pagen and pagen beconsided by: unexpired lease. and pagen beconsided by: unexpired lease. and pagen and pagen beconsided by: and pagen beconsided by	Mcole Marie Pagan 85CBA000AFDE4A0 Nicole Marie Pagan Signature of Debtor 2 3/31/2016 Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California, Sacramento Division

In re	Pagan, Richard Anthony & Pagan, Nicole Marie		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENS	SATION OF ATT	ORNEY FOR I	DEBTOR	
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), ompensation paid to me within one year before the filing of e rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankrupt	cy, or agreed to be pa	id to me, for service	
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have received			1,100.00	
	Balance Due		\$	400.00	
2. Т	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. Т	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
ļ. l	I have not agreed to share the above-disclosed compensatirm.	ation with any other person	on unless they are me	mbers and associate	es of my law
I	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of				ny law firm. A
5. 1	n return for the above-disclosed fee, I have agreed to render	r legal service for all asp	ects of the bankruptcy	v case, including:	
b c	 Analysis of the debtor's financial situation, and rendering Preparation and filing of any petition, schedules, statemer Representation of the debtor at the meeting of creditors at [Other provisions as needed] Balane will be paid post-filing 	nt of affairs and plan wh	ich may be required;	-	ankruptcy;
5. E	By agreement with the debtor(s), the above-disclosed fee doo Motion work and representation in an adver		ing service:		
	CI	ERTIFICATION			
I this ba	certify that the foregoing is a complete statement of any agrankruptcy proceeding.	reement or arrangementDocuSigned by		r representation of t	ne debtor(s) in
3	/31/2016	Paul Bain	LS		
De	nte	Pt F2855C68E7B4 Signature of Attor. Bankruptcy Lav	ney		
		1851 Heritage L Sacramento, CA (707) 422-8500 paulb@bankrup Name of law firm	\ 95815-4923 Fax: (888) 843-720	60	

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UNITED STATES BANKRUPTCY COURT Eastern District of California, Sacramento Division

In re)	
Mayfield, Stanley)	
)	Case No.
)	
	Debtor(s).)	
		_)	

VERIFICATION OF MASTER ADDRESS LIST

I (we) declare under penalty of perjury that the Master Address List submitted for filing in this case is a true, correct, and complete listing.

I (we) acknowledge that the accuracy and completeness of the Master Address List is the shared responsibility of the debtor(s) and the debtor's(s') attorney or bankruptcy petition preparer, if any.

I (we) further acknowledge that the Court will rely on the Master Address List for all mailings, and that the various schedules and statements required by the Bankruptcy Code and the Federal Rules of Bankruptcy Procedure will not be used for mailing purposes.

4/4/2016 DATED:	Stavly Mayfild DE29F0BB45A74E2 Deptor's Signature
DATED:	Joint Debtor's (if any) Signature

Submit this form and your Master Address List to one of the following addresses:

Sacramento Division 501 I Street, Suite 3-200 Sacramento, CA 95814 **Modesto Division Mailing Address:** 501 I Street, Suite 3-200 Sacramento, CA 95814

Fresno Division 2500 Tulare Street, Suite 2501 Fresno, CA 93721

Physical Address: 1200 I Street, Suite 4 Modesto, CA 95354

Part 3: Sign Below

hav

Χ

Date

	in this information to ider			
	ted States Bankruptcy C			
EAS	STERN DISTRICT OF C	ALIFORNIA, SACRAMENTO DIVISION		
Cas	se number (if known):			
Of	ficial Form 12 ²	1		
St	atement Ab	out Your Social Security	Numbers	12/15
		<u> </u>		
form	as part of the public c		Taxpayer Identification numbers you have used. Do not fil nd must not be included in the court's public electronic re	
Indi the p	vidual Taxpayer Numbe	er on any other document filed with the court. The	olic. You should not include a full Social Security Number of court will make only the last four digits of your numbers k J.S. Trustee or bankruptcy administrator, and the trustee a	nown to
-				
		oncealing property, or obtaining money or proper ment for up to 20 years, or both. 18 U.S.C. §§ 152.	ty by fraud in connection with a bankruptcy case can resu	ılt in fines
up t	ο φ250,000, οι ππρτί σοπ	ment for up to 20 years, or both. To 0.5.6. 99 152	1341, 1313, and 3371.	
Par	t 1: Tell the Court Abo	out Yourself and Your spouse if Your Spouse is Fi		
		For Debtor 1:	For Debtor 2 (Only if Spouse is Filing:)	
1.	Your name	Stanley		
		First name	First name	_
		Middle name	Middle name	_
		Mayfield	Middle Harrie	
		Last name	Last name	_
Dor	t 2: Tall the Court Abe	but all of Your Social Socurity or Endoral Individua	L Taynayar Identification Numbers	
rai	12. Tell the Court Abo	out all of Your Social Security or Federal Individua	Taxpayer identification Numbers	
2.	All Social Security			
	Numbers you have used	-4906		
	4004		_	
		\square You do not have a Social Security Number	☐ You do not have a Social Security Number	
3.	All federal Individual			
	Taxpayer			
	Identification		_	_
	Numbers (ITIN) you have used	You do not have an ITIN.	☐ You do not have an ITIN.	

Under penalty of periury. I declare that the information I haw DocuSigned by:

Stanley Mayfield

4/4/2016

DF29F0BB45A74E2... Startiey iwayrieto Signature of Debtor 1

d correct.

Under penalty of perjury, I declare that the information I have provided in this form is true and correct.

Signature of Debtor 2

Date

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF CALIFORNIA, SACRAMENTO DIVISION	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's	Stanley First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Mayfield Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Stan Mayfield Stan Mayfield, Jr.	
	Include your married or maiden names.	Stanley Mayfield, Jr.	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4906	

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Filed 05/03/16

Doc 15

Debtor 1 Mayfield Stanley

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	3157 Staysail St	If Debtor 2 lives at a different address:			
		Sacramento, CA 95833-4421 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Sacramento	· · · · · · · · · · · · · · · · · · ·			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Debtor 1 Mayfield, Stanley

Filed 05/03/16

Doc 15

Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7						
	choosing to file under							
		☐ Chap	ter 11					
		☐ Chap	oter 12					
		☐ Chap	oter 13					
8.	How you will pay the fee	— ab	out how yo	u may pay. Typica ey is submitting yo	Illy, if you are paying the fee yours	with the clerk's office in your local court for elf, you may pay with cash, cashier's check ttorney may pay with a credit card or check	, or money order.	
						, sign and attach the Application for Individu	als to Pay The	
Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for not required to, waive your fee, and may do so only if your income is less than 150% of your family size and you are unable to pay the fee in installments). If you choose this op					e is less than 150% of the official poverty lin). If you choose this option, you must fill out	e that applies to		
		το	nave the (Snapter / Filing Fe	ee <i>Waived</i> (Official Form 103B) a	nd file it with your petition.		
9.	Have you filed for bankruptcy within the last	■ No.						
	8 years?	☐ Yes.						
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases	■ No						
	pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	■ No.	Go to	line 12.				
	residence?	☐ Yes.	Has yo	our landlord obtain	ed an eviction judgment against y	ou and do you want to stay in your residence	e?	
				No. Go to line 12				
				Yes. Fill out <i>Initia</i> bankruptcy petition		dgment Against You (Form 101A) and file	it with this	

Filed 05/03/16

Doc 15

DCD	iviayneid, Stainey			Case Humber (# Known)			
Par	Report About Any Bus	sinesses \	ou Own as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	No. Go to Part 4.				
		☐ Yes.	Name and location of bu	usiness			
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach it		Number, Street, City, St	ate & ZIP Code			
	to this petition.		Check the appropriate b	ox to describe your business:			
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))			
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))			
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))			
			☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))			
			☐ None of the abov	ve			
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach y				court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure in 11			
	For a definition of small	No.	I am not filing under Chapter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Par	t 4: Report if You Own or	Have Any	Hazardous Property or Ar	y Property That Needs Immediate Attention			
14.	Do you own or have any property that poses or is	■ No.					
	alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is the hazard?				
	safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?				
			,				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?				
	a.gom ropano.			Number, Street, City, State & Zip Code			

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Debtor 1 Mayfield, Stanley

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	Debtor 1 Mayfield, Stanley				Case number (if known)			
Par	Answer These Question	ons for Re	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts pri	marily consumer debts? Consor a personal, family, or househous	sumer debts are defin	ned in 11 U.S.C.§ 101(8) as "incurred by an		
			☐ No. Go to line 16	3b.				
			Yes. Go to line 1	17 .				
		16b.		marily business debts? Busin estment or through the operatio		nat you incurred to obtain money ovestment.		
			☐ No. Go to line 16	3c.				
			☐ Yes. Go to line 1	7.				
		16c.	State the type of deb	ots you owe that are not consum	er debts or business of	debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under	r Chapter 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	Yes.		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will be		■ No					
	available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do	1 -49		1 ,000-5,000	0	2 5,001-50,000		
	you estimate that you owe?	□ 50-99		□ 5001-10,00		<u></u>		
		☐ 100-1		☐ 10,001-25,0	000	☐ More than100,000		
		200-9	99					
19.	How much do you	□ \$0 - \$		□ \$1,000,001		□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		01 - \$100,000		01 - \$50 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			001 - \$500,000 001 - \$1 million		01 - \$100 million 101 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you	□ \$0 - \$	50.000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,00	1 - \$50 million	□ \$1,000,000,001 - \$10 billion		
	De:		001 - \$500,000		11 - \$100 million	\$10,000,000,001 - \$50 billion		
		□ \$500,	001 - \$1 million	□ \$100,000,0	01 - \$500 million	☐ More than \$50 billion		
Par	7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
				nd I did not pay or agree to pay s tice required by 11 U.S.C. § 342		n attorney to help me fill out this document, I		
		I request	relief in accordance	with the chapter of title 11, Unit	ted States Code, spec	cified in this petition.		
			isigned by: Lley Mayfilld			roperty by fraud in connection with a bankruptcy 18 U.S.C. §§ 152, 1341, 1519, and 3571.		
		Starries	F0BB45A74E2 r wayneru		Signature of Debto	r 2		
		oignatur	e of Debtor 1 4/4/2016					
		Executed		vv	Executed on	1 / DD / YYYY		
			IVIIVI / UU / TT		IVIIV	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		

DocuSign Envelope ID: AE2AF77B-BE11-4365-9DB4-514ED8BCDD76 Filed 05/03/16 Doc 15 Debtor 1 Mayfield, Stanley Case number (if known) For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under represented by one Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in If you are not represented by which \$ 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the DocuSigned by: an attorney, you do not need to file this page. 'aul Bains 4/4/2016 Date F2855C68E7B449E... for Debtor MM / DD / YYYY **Pauldeep Bains** Bankruptcy Law Group, PC 1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923

Email address

paulb@bankruptcylg.com

268004

Bar number & State

Number, Street, City, State & ZIP Code

Contact phone (916) 678-5000

Certificate Number: 17572-CAE-CC-027173760



CERTIFICATE OF COUNSELING

I CERTIFY that on March 24, 2016, at 4:03 o'clock PM PDT, Stanley Mayfield received from Dollar Learning Foundation, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: March 24, 2016 By: /s/Selin Polat

Name: Selin Polat

Title: Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

Fill	in this inform	ation to identify your	case:				
Deb		Stanley Mayfield					
	101 1	First Name	Middle Name	Last Name	- }		
	tor 2 use if, filing)	First Name	Middle Name	Last Name	_		
		kruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENTO			
Case	e number				_		
(if kno						_	if this is an
						amend	ded filing
		<u>m 106Sum</u>					
				d Certain Statistical Infor			12/15
infor	mation. Fill of original form	ut all of your schedule	s first; then complete the	re filing together, both are equally respendering to are filing the box at the top of this page.			
						Your as	ssets f what you own
1.	Schedule A/I 1a. Copy line	B: Property (Official Fo	orm 106A/B) com Schedule A/B			\$	205,000.00
	1b. Copy line	e 62, Total personal prop	perty, from Schedule A/B			\$	26,520.08
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	231,520.08
Part	2: Summa	rize Your Liabilities					
							abilities you owe
2.			aims Secured by Property (nn AAmount of claim, at the	Official Form 106D) bottom of the last page of Part 1 of Scheo	dule D	\$	211,103.00
3.			Unsecured Claims (Official I	Form 106E/F) s) from line 6e & chedule E/F		\$	4,889.40
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured cla	aims) from line 6j oschedule E/F		\$	14,691.0
				Your tot	tal liabilities	\$	230,683.41
Dow			Funancia				
Part		rize Your Income and					
4.	Schedule I: Y	Your Income(Official Formation of the Communication	rm 106I) e from line 12 o \$ chedule I			\$	3,381.80
5.	Schedule J: 'Copy your mo	Your Expenses (Official onthly expenses from line	Form 106J) e 22c of Schedule J			\$	4,220.00
Part	4: Answer	These Questions for	Administrative and Statis	tical Records			
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. Che	ck this box and submit this form to the cou	rt with your o	ther schedul	es.
7.	Yes What kind of	f debt do you have?					
	Your de	ebts are primarily cons		ebts are those "incurred by an individual prical purposes. 28 U.S.C§ 159.	imarily for a p	oersonal, fam	nily, or household
	☐ Your de		_	e nothing to report on this part of the form.	Check this b	ox and subm	nit this form to the

Summary of Your Assets and Liabilities and Certain Statistical Information

Official Form 106Sum

page 1 of 2

Debtor 1 Mayfield, Stanley

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,477.16

\$

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	4,889.40
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	4,889.40

		Case	10-22	1134 Hed 03/03/10 D00	13			
Fill in this inforn	nation to identify you	r case and thi	is filing					
Debtor 1	Stanley Mayfiel	d						
	First Name		e Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle	e Name	Last Name				
	nkruptcy Court for the:	EASTERN	DISTRI	CT OF CALIFORNIA, SACRAMENTO DIV	/ISION			
	. ,			·				
Case number _								Check if this is an amended filing
Official Fo	rm 106A/B							
	e A/B: Pro	pertv						12/15
think it fits best. Bo information. If more Answer every ques	e as complete and accur e space is needed, attaction.	ate as possible h a separate sh	e. If two neet to th	only once. If an asset fits in more than one of married people are filing together, both are explicitly in the state of th	qually respon	nsible for sup	plyin	g correct
☐ No. Go to Part Yes. Where is	t 2. s the property?							
1.1			What	is the property? Check all that apply				
0.45= 0.4				Single-family home	Do not dedu	uct secured cla	aims o	r exemptions. Put
3157 Stay	sall St if available, or other description	<u></u>		Duplex or multi-unit building	the amount of any secured claims on Schedu Creditors Who Have Claims Secured by Prop			
oncor address,	in available, or other accomplis	311		Condominium or cooperative				, , ,
			■ Manufactured or mobile home		Current value of the Current value			
Sacramen	nto CA 95	833-4421		Land	entire prop			rrent value of the tion you own?
City	State	ZIP Code		Investment property	\$20	5,000.00	_	\$205,000.00
				Timeshare	Describe th	ne nature of y	our o	wnership interest
			\	Other	`	e simple, tena e), if known.	ancy	by the entireties, or
			wno	has an interest in the property? Check one Debtor 1 only	Fee Sim	* *		
Sacramen	nto		_	Debtor 2 only				
County				•				
						if this is com tructions)	muni	ty property
				r information you wish to add about this iten erty identification number:	n, such as loc	al		
				idence				
2. Add the dolla	ar value of the portior	n you own for	all of y	our entries from Part 1, including any e	ntries for pa	ages		\$20E 000 00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

you have attached for Part 1. Write that number here......>>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$205,000.00

Schedule A/B: Property

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☐ Yes. Describe.....
Official Form 106A/B

Yes.....

Institution name:

motitation name.

Checking Account

17.2. Savings Account Navy Federal Credit Union ... 4741 \$0.00

Navy Federal Credit Union ... 6747

17.3. Savings Account Capital One ... 079 \$50.00

17.4. Checking Account Chase ... 5693 \$500.00

17.5. Savings Account Chevron Federal Credit Union ... 896 \$20.00

Official Form 106A/B Schedule A/B: Property

\$0.00

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them...

Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

No No				
Yes. Give specific information about then	n, including whether	you already filed the	returns and the tax y	ears

Official Form 106A/B Schedule A/B: Property page 4

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No

Official Form 106A/B Schedule A/B: Property page 5

☐ Yes. Give specific information.......

Debtor 1 Mayfield, Stanley		Case number (if known)							
54. Add the dollar value of all of your entries from Part 7. Write that number here									
Part 8: List the Totals of Each Part of this Form									
55. Part 1: Total real estate, line 2			\$205,000.00						
56. Part 2: Total vehicles, line 5	\$7,077.00								
57. Part 3: Total personal and household items, line 15	\$3,300.00								
58. Part 4: Total financial assets, line 36	\$16,143.08								
59. Part 5: Total business-related property, line 45	\$0.00								
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00								
61. Part 7: Total other property not listed, line 54	+ \$0.00								
62. Total personal property. Add lines 56 through 61	\$26,520.08	Copy personal property total	\$26,520.08						
63. Total of all property on Schedule A/B . Add line 55 + line 62		_	\$231,520.08						

Official Form 106A/B Schedule A/B: Property page 6

Vehicle Appraisal

Page 1 of 1



DATE: 3/30/2016

866 218 1003 tel www.CINlegal.com

Edmunds.com Used Vehicle Appraisal

VEHICLE INFORMATION:

YEAR: 2013 **CONDITION:** Average

MAKE: Nissan **MILEAGE: 92000**

ZIP CODE: 95833 MODEL: Altima

STYLE: 2.5 4dr Sedan (2.5L 4cyl CVT)

OPTIONS:

RETAIL

TRADE IN

PRIVATE PARTY

Edmunds.com TMV®

\$8,193.00

\$5,848.00

\$7,077.00

The Edmunds.com TMV® (Edmunds.com True Market Value®) price is Edmunds.com's determination of the current average base ["dealer retail"] ["private party"] ["dealer tradein"] price in the area indicated by the Zip Code provided, unadjusted for color or any options. (If no Zip Code was provided, this price is the national price.)

DATA PROVIDED BY



Fill in this infor	mation to identify your	case:		
Debtor 1	Stanley Mayfield			
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F CALIFORNIA, SACRAMENTO	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt	
---	--

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

CCP § 703.140(b)(1)
CCP § 703.140(b)(3)
CCP § 703.140(b)(3)
CCP § 703.140(b)(3)
CCP § 703.140(b)(3)
CCP § 703.140(b)(3)

Official Form 106C

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Cash on Hand Line from Schedule A/B 16.1	\$300.00		\$300.00	CCCP § 703.140(b)(5)
	Zine nem concedure 702. 10.1			100% of fair market value, up to any applicable statutory limit	
	Navy Federal Credit Union 6747 Line from Schedule A/B 17.1	\$0.00			CCCP § 703.140(b)(5)
	Line from Schedule A/B. 17.1			100% of fair market value, up to any applicable statutory limit	
	Navy Federal Credit Union 4741 Line from Schedule A/B 17.2	\$0.00			CCCP § 703.140(b)(5)
	Line from Schedule A/B. 17.2		•	100% of fair market value, up to any applicable statutory limit	
	Capital One 079 Line from Schedule A/B 17.3	\$50.00		\$50.00	CCCP § 703.140(b)(5)
	Line Holli Schedule A/B. 17.3			100% of fair market value, up to any applicable statutory limit	
	Chase 5693 Line from Schedule A/B 17.4	\$500.00		\$500.00	CCCP § 703.140(b)(5)
	Line Holli Schedule A/B. 17.4			100% of fair market value, up to any applicable statutory limit	
	Chevron Federal Credit Union 896 Line from Schedule A/B 17.5	\$20.00		\$20.00	CCCP § 703.140(b)(5)
	Line from Scriedule A/B. 17.3			100% of fair market value, up to any applicable statutory limit	
	Thrift Savings Plan through Employer	\$15,273.08		\$15,273.08	CCCP § 703.140(b)(10)(E)
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 yr	years after that for case	s filed		
	□ No □ Yes				

Fill in this inform	nation to identify you	r case:				
Debtor 1	Stanley Mayfiel	d				
	First Name	Middle Name L	ast Name		-	
Debtor 2 (Spouse if, filing)	First Name	Middle Name L	ast Name		-	
		EASTERN DISTRICT OF CALIFO	RNIA, SAC	CRAMENTO		
United States Bar	nkruptcy Court for the:				_	
Case number						
(if known)						if this is an led filing
Official Form	106D					
		Who Have Claims Se	ecure	d by Propert	ty	12/15
		f two married people are filing together, I			<u> </u>	on. If more space is
		, number the entries, and attach it to this				
,	have claims secured by	your property?				
	-	is form to the court with your other sche	dules. You	have nothing else to re	eport on this form.	
_	all of the information be	•		J	•	
	I Secured Claims					
		nore than one secured claim, list the credito	r separately	Column A	Column B	Column C
for each claim. If me	ore than one creditor has	a particular claim, list the other creditors in		Amount of claim	Value of collateral	Unsecured
much as possible, is	st the claims in alphabetic	cal order according to the creditor 's name.		Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Cenlar Lo Reporting	an Admin &	Describe the property that secures the	claim:	\$194,417.00	\$205,000.00	\$0.00
Creditor's Name		3157 Staysail St, Sacramento,				
		95833-4421				
		Residence As of the date you file, the claim is: Che	ack all that			
425 Phillip		apply.	ok all triat			
	08618-1430	☐ Contingent☐ Unliquidated				
Number, Street,	City, State & Zip Code	☐ Disputed				
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mor	tgage or sec	cured		
Debtor 2 only		car loan)				
Debtor 1 and De	•	☐ Statutory lien (such as tax lien, mecha	nic's lien)			
☐ At least one of the Check if this cla	ne debtors and another	Judgment lien from a lawsuit	irst Morto	7270		
community del		Other (including a right to offset)	ist Mort	yaye		
Date debt was incu	ırred	Last 4 digits of account number	2777			
Navy Fede	eral Credit					
^{2.2} Union		Describe the property that secures the		\$16,686.00	\$7,077.00	\$9,609.00
Creditor's Name	•	2013 Nissan Altima 2.5 4dr Se (2.5L 4cyl CVT)	dan			
PO Box 30		As of the date you file, the claim is: Che	eck all that			
Merrifield, 22119-300		apply.				
	City, State & Zip Code	☐ Contingent☐ Unliquidated				
rumber, eneet,	Oity, Otato a zip oodo	☐ Disputed				
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mor	tgage or sec	cured		
Debtor 2 only		car loan)				
Debtor 1 and De		Statutory lien (such as tax lien, mecha	nic's lien)			
☐ At least one of the Check if this cla	ne debtors and another	☐ Judgment lien from a lawsuit☐ Other (including a right to offset)				
community del		other (including a right to offset)				

Official Form 106D

DocuSign Envelope ID: AE2AF77B-BE11-4365-9DB4-514ED8BCDD76 Case 16-22134 Filed 05/03/16 Doc 15

Debto	or 1 Stanley Mayfield		Case number (f know)					
	First Name Middle Name	Last Name						
Date o	debt was incurred	Last 4 digits of account number	3761					
	he dollar value of your entries in Column A	. •	nere: \$211,103.00					
	is the last page of your form, add the dolla that number here:	ar value totals from all pages.	\$211,103.00					
Part	List Others to Be Notified for a De	bt That You Already Listed						
trying than c	to collect from you for a debt you owe to	someone else, list the creditor in Par sted in Part 1, list the additional cred	ebt that you already listed in Part 1. For example, if a collection agency is Part 1, and then list the collection agency here. Similarly, if you have more reditors here. If you do not have additional persons to be notified for any					
	Name, Number, Street, City, State & Zip Coc Central Loan Admin & R		On which line in Part 1 did you enter the creditor? 2.1					
	425 Phillips Blvd Ewing, NJ 08618-1430		Last 4 digits of account number					
	Name, Number, Street, City, State & Zip Coo Navy Federal Cr Union	de	On which line in Part 1 did you enter the creditor? 2.2					
	PO Box 3700 Merrifield, VA 22119-3700		Last 4 digits of account number <u>3761</u>					

E	in this inform	nation to identify your	2001					
		nation to identify your o	ase:					
De	btor 1	Stanley Mayfield First Name	Middle I	Name	Last Name			
Del	btor 2							
(Spo	ouse if, filing)	First Name	Middle I	Name	Last Name			
Uni	ited States Ba	inkruptcy Court for the:	EASTERN DIVISION	DISTRICT OF C	CALIFORNIA, SACRAM	MENTO		
Ca	se number							
(if kı	nown)			_			_	if this is an ded filing
		m 106E/F						
Sc	hedule E	/F: Creditors W	ho Have	Unsecure	ed Claims			12/15
any Scho D: C the (case	executory cont edule G: Execu reditors Who I Continuation P e number (if kn	d accurate as possible. Us tracts or unexpired leases trory Contracts and Unexpirate Claims Secured by Prage to this page. If you havown). Il of Your PRIORITY Un	that could res ired Leases (O operty. If more re no informat	ult in a claim. Als official Form 106G e space is needec ion to report in a	so list executory contrac i). Do not include any cre I, copy the Part you need	ts on Schedule A/B: Peditors with partially so d, fill it out, number the	roperty (Official Forr ecured claims that a e entries in the boxes	m 106A/B) and on re listed in Schedule s on the left. Attach
		ors have priority unsecure						
	No. Go to F		a ciaiiiis agaii	ist you.				
	Yes.	u.,						
2.	identify what ty possible, list th	r priority unsecured claims rpe of claim it is. If a claim ha e claims in alphabetical orde one creditor holds a particul	s both priority a er according to	and nonpriority ame the creditor 's nam	ounts, list that claim here a	and show both priority a	nd nonpriority amount	ts. As much as
	(For an explana	ation of each type of claim, s	ee the instructi	ons for this form in	the instruction booklet.)	Total claim	Priority amount	Nonpriority amount
2.1		I Revenue Service		ast 4 digits of ac	count number	\$4,889.40	\$4,889.40	\$0.00
	Priority Cr	reditor's Name	v	When was the deb	ot incurred?			
	PO Box Philade	elphia, PA 19101-734	6				_	
		treet City State Zlp Code d the debt? Check one.	_	_	i file, the claim is: Check	all that apply		
	_			Contingent				
	Debtor 1 o	,	L	Unliquidated				
	Debtor 2 o	only		Disputed				
	Debtor 1 a	and Debtor 2 only			unsecured claim:			
	At least or	ne of the debtors and anothe	_{er} [Domestic suppo	ort obligations			
	☐ Check if t	this claim is for a commur	nity debt	Taxes and certa	ain other debts you owe the	e government		
	Is the claim s	subject to offset?	[Claims for death	n or personal injury while y	ou were intoxicated		
	No		[Other. Specify				_
	☐ Yes							
Pai	rt 2: List A	II of Your NONPRIORIT	Y Unsecured	Claims				
		ors have nonpriority unsec						
		ve nothing to report in this pa		,	with your other schedules			
	Yes.	ve nothing to report in this pa	art. Submit triis	Torri to the court v	viin your other schedules.			
4.	unsecured clair	r nonpriority unsecured cla m, list the creditor separately tor holds a particular claim, li	for each claim	. For each claim lis	sted, identify what type of	claim it is. Do not list cla	ims already included i	in Part 1. If more
							Tota	al claim

Official Form 106 E/F

Debto	^{r 1} Mayfield, Stanley	Case number (f know)	
4.1	Bankcard Services Nonpriority Creditor's Name	Last 4 digits of account number	\$797.73
	Trengthenry creation of training	When was the debt incurred?	
	PO Box 4477		
	Beaverton, OR 97076-4401 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is. Oneck all that apply	
	Debtor 1 only	Пол	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Capital One	Last 4 digits of account number 7548	\$993.00
	Nonpriority Creditor's Name	7,540	φ333.00
	Attn: Bankruptcy PO Box 30285	When was the debt incurred?	
	Salt Lake City, UT 84130-0285		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	<u> </u>	report as priority claims	
	■ No □ Yes	 □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 	
		Other. Specify	
4.3	Citibank/the Home Depot Nonpriority Creditor's Name	Last 4 digits of account number 1771	\$586.00
	Citicorp Credit Srvs/Centralized	When was the debt incurred?	
	Bankrup		
	PO Box 790040		
	Saint Louis, MO 63179-0040 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is. Offect all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Debto	Mayfield, Stanley	Case number (if know)	
4.4	Navy Federal Cr Union Nonpriority Creditor's Name	Last 4 digits of account number 2194 When was the debt incurred?	\$12,155.00
	PO Box 3700 Merrifield, VA 22119-3700 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	_	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt	Dobligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.5	Traeger Grills LLC	Last 4 digits of account number	\$159.28
ت ا	Nonpriority Creditor's Name		ψ103.20
	Dept 3368	When was the debt incurred?	
	PO Box 123368 Dallas, TX 75312-3368		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
	his page only if you have others to be notified	ebt That You Already Listed I about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example someone else, list the original creditor in Parts 1 or 2, then list the collection agency	
	more than one creditor for any of the debts the debts to defen any debts in Parts 1 or 2, do not fill out	nat you listed in Parts 1 or 2, list the additional creditors here. If you do not have addi or submit this page.	itional persons to be
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	al One Bank USA N) Capital One Dr	Line 4.2 of (Check one):	
	mond, VA 23238-1119	■ Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number 7548	
	and Address rtment of Justice	On which entry in Part 1 or Part 2 did you list the original creditor? Line 2.1 of (Check one):	
	Division Ben Franklin Station	Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Clair Part 2: Creditors with Nonpriority Unsecured Company of the Priority Unsecured Clair Part 1: Creditors with Priority Unsecured Clair	
	ox 683	T art 2. Oreditors with Nonphority of secured v	Olalitis
Wash	nington, DC 20044-0683	Last 4 digits of account number	
	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Thd/0	Cbna ox 6497	Line 4.3 of (Check one):	
_	c Falls, SD 57117-6497	■ Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number 1771	
Name a	and Address	On which entry in Part 1 or Part 2 did you list the original creditor?	

Official Form 106 E/F

Debtor 1 Mayfield, Stanley Case number (f know)

US Attorney (For IRS) 501 I St Ste 10-100 Sacramento, CA 95814-7300 Line 2.1 of (Check one):

■ Part 1: Creditors with Priority Unsecured Claims

☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	4,889.40
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ ———	
				Φ	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	4,889.40
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	14,691.01
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	14,691.01

ill in this infor	mation to identify your	case:		
Debtor 1	Stanley Mayfield			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F CALIFORNIA, SACRAMENT	0
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.3	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	Name				<u> </u>
	Name				
	Number	Street			_
	City		State	ZIP Code	

Official Form 106G

DocuSign Envelope ID: AE2AF77B-BE11-4365-9DB4-514ED8BCDD76 CaSe 16-22134 Filed 05/03/16 Doc 15

Fill in this	s information to identify your	case:			
Debtor 1	Stanley Mayfield First Name	Middle Nege	Loot Nome		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT OF O	CALIFORNIA, SACRA	MENTO	
Case num	sher				
(if known)					Check if this is an amended filing
Officia	ll Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
are filing to and numbe	ogether, both are equally resp	onsible for supplying corre the left. Attach the Addition	ct information. If mo	re space is needed, cop	as possible. If two married people y the Additional Page, fill it out, iional Pages, write your name and
1. Do	you have any codebtors? (If y	ou are filing a joint case, do no	ot list either spouse as	a codebtor.	
■ No					
	thin the last 8 years, have you rnia, Idaho, Louisiana, Nevada,				tates and territories include Arizona,
_			,, 3 ,	,	
_	. Go to line 3.				
■ Yes	s. Did your spouse, former spous	se, or legal equivalent live with	you at the time?		
	■ No				
	☐ Yes.				
	In which community state	or territory did you live?	-NONE-	. Fill in the name and	current address of that person.
	Name of your spouse, former sp				
	Number, Street, City, State & Zip	Code			
line 2	again as a codebtor only if th , Schedule E/F (Official Form	at person is a guarantor or	cosigner. Make sure	you have listed the cre	th you. List the person shown in ditor on Schedule D (Official Form E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	itor to whom you owe the debt that apply:
0.4				Пол. т. в. г.	
3.1	Name			_ ☐ Schedule D, line☐ Schedule E/F. lin	
				☐ Schedule E/F, IIII	
-	No. of the state o			- Conteduie e, iiile	
	Number Street City	State	ZIP Code		
3.2				☐ Schedule D, line	
<u> </u>	Name			Schedule E/F, lin	<u></u> е
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2016 CIN Group - www.cincompass.com Schedule H: Your Codebtors

Fill	in this information to identify your cas	se:						
Deb	otor 1 Stanley Mayf	ield			_			
	otor 2				-			
Uni	ted States Bankruptcy Court for the:	EASTERN DISTRICT SACRAMENTO DIVIS	·		_			
	se number own)							
O	fficial Form 106l				<u></u>	// / DD/ Y	YYY	
S	chedule I: Your Inco	me						12/1
supp spou attac	s complete and accurate as possibility of the second second section of the second seco	re married and not filing spouse is not filing with	g jointly, and your sp h you, do not include	oouse is li e informati	ving with y ion about y	ou, includ	le information abo se. If more space i	out your s needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spou	ıse
	If you have more than one job,	Employment status	■ Employed			☐ Employed		
	attach a separate page with information about additional	Employment states	☐ Not employed			☐ Not e	mployed	
	employers.	Occupation	Machine Operat	or				
	Include part-time, seasonal, or self-employed work.	Employer's name	Department of 1	Treasury				
	Occupation may include student or homemaker, if it applies.	Employer's address	155 Hermann St San Francisco,		2			
		How long employed th	nere? 6 years	and 3 m	onths			
Par	t 2: Give Details About Mont	hly Income				_		
	mate monthly income as of the dat so you are separated.	e you file this form. If yo	ou have nothing to repo	ort for any l	line, write \$0) in the spa	ace. Include your no	n-filing spouse
	u or your non-filing spouse have more ee, attach a separate sheet to this form		oine the information for	all employ	ers for that	person on	the lines below. If yo	ou need more
					For Del	otor 1	For Debtor 2 or non-filing spou	
2.	List monthly gross wages, salary deductions). If not paid monthly, cal			2.	\$4	,745.87	\$	N/A
3.	Estimate and list monthly overting	ne pay.		3. +	+\$	0.00	+\$	N/A
4.	Calculate gross Income. Add line	2 + line 3.		4.	\$ 4,7	45.87	\$N//	<u>1</u>

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Mayfield, Stanley	_	Case	number (if known)			
				For	Debtor 1	For Debtor		
	Сор	y line 4 here	4.	\$	4,745.87	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,183.24	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	180.83	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$_	0.00	+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ _	1,364.07	\$	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	3,381.80	\$	N/A	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ \$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$ _	0.00	\$	N/A N/A	
	8e.	Social Security	8e.	<u>\$</u> -	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$;	3,381.80 + \$_	N/A	= \$ 3,	,381.80
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your dear friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not available:	ependen				+\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					\$3,	381.80
13.	Do y	you expect an increase or decrease within the year after you file this form? No. Yes Explain:	•				Combined monthly in	

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	otor 1 Stanley Mayfield		Chec	k if this is:	
Dah				An amended filing	tanan arta atti atti arabanda da
	ouse, if filing)			A supplement show expenses as of the	ring postpetition chapter 13 following date:
Unit	ted States Bankruptcy Court for the: EASTERN DISTRICT OF SACRAMENTO DIVISION	•	-	MM / DD / YYYY	
l	se number known)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married peo ormation. If more space is needed, attach another sheet to known). Answer every question.				
Par 1.	tt 1: Describe Your Household Is this a joint case?				
	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household? ☐ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Exp	penses for Separate Hous	eholdof Debtor	2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this informat each dependent	•		Dependent's age	Does dependent live with you?
	Do not state the				□No
	dependents names.	Son		4	Yes
					□ No □ Yes
					□ No
					☐ Yes
					□ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes				
	tt 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date ur penses as of a date after the bankruptcy is filed. If this is a plicable date.				
val	lude expenses paid for with non-cash government assist ue of such assistance and have included it on <i>Schedule I</i>			Your exp	onege
(On	ficial Form 106l.)			Tour exp	CIISCS
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	ence. Include first mortgag	je 4. \$		1,300.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		130.00
_	4d. Homeowner's association or condominium dues		4d. \$		60.00

Official Form 106J Schedule J: Your Expenses page 1

ebtor 1	Mayfield, Stanley	Case num	ber (if known)	
. Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	78.00
6b.	Water, sewer, garbage collection	6b.	\$	165.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	179.00
6d.	Other. Specify: Security	6d.	\$	104.00
. Foo	d and housekeeping supplies		\$	500.00
	dcare and children's education costs	8.	\$	0.00
	hing, laundry, and dry cleaning	9.	\$	75.00
	sonal care products and services	10.	•	100.00
	lical and dental expenses	11.	·	50.00
	nsportation. Include gas, maintenance, bus or train fare.		·	
Do r	not include car payments.	12.	\$	300.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
4. Cha	ritable contributions and religious donations	14.	\$	0.00
5. Ins u	rance.			
Do r	not include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	120.00
15d.	Other insurance. Specify:	15d.	\$	0.00
6. Tax	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe	cify: Tax Payments	16.	\$	100.00
	allment or lease payments:			
	Car payments for Vehicle 1	17a.	\$	409.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
17d.	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as			400.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		400.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe	,	19.		
	er real property expenses not included in lines 4 or 5 of this form or on Schedi	u ie I: Yo u 20a.		0.00
	Mortgages on other property			0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.	·	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
. Oth	er: Specify:	21.	+\$	0.00
2. Calo	culate your monthly expenses			
	Add lines 4 through 21.		\$	4,220.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	4,220.00
			l -	4 220 00
ZZC.	Add line 22a and 22b. The result is your monthly expenses.		\$	4,220.00
3. Calo	culate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,381.80
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	4,220.00
23c.	Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	-838.20
For e	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?			or decrease because of a
	No.			
П,	'es. Explain here:			

Official Form 106J Schedule J: Your Expenses page 2

Debtor 1	Stanley Mayfield				
	First Name	Middle Name	Last Name		
ebtor 2					
pouse if, filing)	First Name	Middle Name	Last Name		
nited States Ba	ankruptcy Court for the:	EASTERN DISTRICT C DIVISION	OF CALIFORNIA, SACRAMENTO)	
ase number					
known)					☐ Check if this is an amended filing
eclarat	tion About a		Debtor's Sche		12
Declarate two married per two must file this taining money	tion About a	, both are equally respon le bankruptcy schedules n connection with a bank		ormation. g a false statement	c, concealing property, or
two married per but must file thing training money ears, or both. 1	eople are filing together s form whenever you file or property by fraud in	, both are equally respon le bankruptcy schedules n connection with a bank	sible for supplying correct info	ormation. g a false statement	c, concealing property, or
ewo married per but must file thin training money ars, or both. 1	eople are filing together s form whenever you fil y or property by fraud ir 8 U.S.C. §§ 152, 1341, 19	, both are equally respon le bankruptcy schedules n connection with a bank 519, and 3571.	sible for supplying correct info	ormation. g a false statement up to \$250,000, or	c, concealing property, or
two married pe ou must file thi otaining money ears, or both. 1	eople are filing together s form whenever you fil y or property by fraud ir 8 U.S.C. §§ 152, 1341, 19	, both are equally respon le bankruptcy schedules n connection with a bank 519, and 3571.	sible for supplying correct information or amended schedules. Makin ruptcy case can result in fines	ormation. g a false statement up to \$250,000, or	c, concealing property, or

Signature of Debtor 2

Stanly Mayfield

Stanley Wayfield

Signature of Debtor 1

4/4/2016

Date

Bankcard Services PO Box 4477 Beaverton, OR 97076-4401

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285

Capital One Bank USA N 15000 Capital One Dr Richmond, VA 23238-1119

Cenlar Loan Admin & Reporting (Cenlar) 425 Phillips Blvd Ewing, NJ 08618-1430

Central Loan Admin & R 425 Phillips Blvd Ewing, NJ 08618-1430

Citibank/the Home Depot Citicorp Credit Srvs/Centralized Bankrup PO Box 790040 Saint Louis, MO 63179-0040

Department of Justice Tax Division Ben Franklin Station PO Box 683 Washington, DC 20044-0683 Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Navy Federal Cr Union PO Box 3700 Merrifield, VA 22119-3700

Navy Federal Credit Union PO Box 3000 Merrifield, VA 22119-3000

Thd/Cbna PO Box 6497 Sioux Falls, SD 57117-6497

Traeger Grills LLC Dept 3368 PO Box 123368 Dallas, TX 75312-3368

US Attorney (For IRS) 501 I St Ste 10-100 Sacramento, CA 95814-7300

Debtor 1 Debtor 1 Stanley Mayfield Trail Value Mode Name Last Name Debtor 2 Spower 8, filing) First Name Mode Name Last Name Division Case number (*Newwork) Case number						
Debtor 2 Spouse 4, Birdy First Name Midde Name Last Name	Fill in this in	formation to identify you	r case:			
Debtor 2 Chock if this is an amended filing	Debtor 1	Stanley Mayfiel	d			
United States Bankruptcy Court for the: DIVISION		First Name	Middle Name	Last Name]	
United States Bankruptcy Court for the: DIVISION Case number (If twown) Check if this is an amended filing		First Name	Middle Name	Last Name		
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/11 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Not married Not married Not married Not married Part 2: Details About Your Marital Status and Where other than where you live now? Details Hour of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived Debtor 2 Prior Address: Dates Debtor 2 lived there 9794 Elston Cir Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Elk Grove, CA 95757-6279 2011 - 4/2014 Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?	United States	s Bankruptcy Court for the:		CALIFORNIA, SACRAMEN	NTO OTI	
Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/11 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married Not married Not married Not married Not married Part 2: Details About Your Marital Status and Where other than where you live now? Details Hour of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived Debtor 2 Prior Address: Dates Debtor 2 lived there 9794 Elston Cir Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Elk Grove, CA 95757-6279 2011 - 4/2014 Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?	0	_				
Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/1/1 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married	1	r				
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before	Official	Form 107				
Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before	Stateme	ent of Financial	Affairs for Individ	uals Filing for E	3ankruptcy	4/1
1. What is your current marital status? Married Not married Not married No married No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address:	information. (if known). A	If more space is needed, nswer every question.	attach a separate sheet to th	is form. On the top of any		
Married	Part 1: Gi	ive Details About Your Ma	arital Status and Where You I	_ived Before		
■ Not married 2. During the last 3 years, have you lived anywhere other than where you live now? □ No ■ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there 9794 Elston Cir From-To: □ Same as Debtor 1 Same as Debtor 1 Prom-To: □ Same as Debtor 2 Prom-To: □ Same as Debt	1. What is	your current marital statu	s?			
2. During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there Debtor 2 Prior Address: Dates Debtor 2 lived there 9794 Elston Cir From-To: Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Elk Grove, CA 95757-6279 Form-To: Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Prom-To: Same as Debtor 1 Same as Debtor 1 Prom-To: Same as Debtor 1 Same as Debtor 1 Prom-To: Same as Debtor 1 Same as Debtor 1 Prom-To: Same as Debtor 1 Same as Debtor 1 Prom-To: Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Sources of income Same as Debtor 2 Sources of income Check all that apply. Chefore deductions and Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income Check all that apply. Chefore deductions Sources of income	☐ Mai	rried				
No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there Debtor 2 Prior Address: Dates Debtor 2 lived there Grown 1 Same as Debtor 1 From-To: Same as Debtor 1 Same as Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Debtor 2 Sources Of income Check all that apply. Debtor 2 Sources Of income Check all that apply. Debtor 2 Sources Of income Check all that apply. Debtor 2 Sources Of income Check all that apply. Debtor 2 Sources Of income Check all that apply. Debtor 2 Sources Of income Check all that apply. Debtor 2 Sources Of income Check all that apply. Debtor 2 Sources Of income Check all that apply. Debtor 2 Sources Of income Check all that apply. Debtor 2 Sources Of income Check all that apply. Debtor 2 Sources Of income Check all that apply. Debtor 2	■ Not	married				
## Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Same as Debtor 1 Same as Debtor 1	□ No		·	·		
Elk Grove, CA 95757-6279 2011 - 4/2014 From-To: Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and Check all that apply.	Debtor	1 Prior Address:		ved Debtor 2 Prior A	ddress:	
states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and Check all that apply. Gross income Check all that apply.				☐ Same as Debtor	·1	
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and Check all that apply.	states and ter No Yes	ritories include Arizona, Cal	lifornia, Idaho, Louisiana, Neva	ada, New Mexico, Puerto Ri		
Sources of income Check all that apply. Gross income (before deductions and Check all that apply. Gross income Check all that apply. Gross income Check all that apply.	Fill in the	e total amount of income yo e filing a joint case and you h	u received from all jobs and all	l businesses, including part	t-time activities.	ndar years?
Check all that apply. (before deductions and Check all that apply. (before deductions			Debtor 1		Debtor 2	
				(before deductions and		(before deductions

Official Form 107

Filed 05/03/16 Doc 15

De	ebtor 1	Ma	yfield, Sta	anley		Case	e number (if known)	
					Debtor 1		Debtor 2	
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			1 of curren iled for ban		■ Wages, commissions, bonuses, tips	\$11,623.20	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
			dar year: December 3	31, 2015)	■ Wages, commissions, bonuses, tips	\$52,737.00	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
	List ea	ach s No	• ,	e gross incor	ve income that you received to me from each source separate	•	you listed in line 4.	
					Debtor 1	Crass income from	Debtor 2	Cress income
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
			1 of curren iled for banl		2016 Tax Refund from 2015 Tax Return Fed: \$0.00 State: \$1,290	\$1,290.00		
			dar year: December 3	31, 2015)	2015 - Pension: \$1,300 2015 Tax Refund from 2014 Tax Return Fed: \$2,876 State: \$1,441	\$5,617.00		
Pa	art 3:	List	Certain Pay	ments You	Made Before You Filed for E	Bankruptcy		
6.	_	i ther No.	Neither De	btor 1 nor D	s debts primarily consumer ebtor 2 has primarily consu personal, family, or household	mer debts. Consumer debts a	are defined in 11 U.S.C. § 10	1(8) as "incurred by an
			During the 9	90 days befor	re you filed for bankruptcy, did	you pay any creditor a total of	\$6,425* or more?	
			☐ Yes		each creditor to whom you paid	a total of \$6.425* or more in o	ne or more navments and the	total amount you paid that
				creditor. Do payments to	onot include payments for dor on an attorney for this bankrupto on 4/01/19 and every 3 years	mestic support obligations, su cy case.	ch as child support and alime	ony. Also, do not include
		/oc	•	•	, ,		,	
	— Y	es.			r both have primarily consure you filed for bankruptcy, did		\$600 or more?	
			■ No.	Go to line 7				
			□ Yes		· each creditor to whom you paid	a total of \$600 or more and th	e total amount vou paid that o	reditor. Do not include
			. 30		or domestic support obligations			

Official Form 107

Der	otor 1 Mayfield, Stanley		Cas	e number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
7.	Within 1 year before you filed for bankruptour insiders include your relatives; any general partry which you are an officer, director, person in contibusiness you operate as a sole proprietor. 11 U.	ners; relatives of any general trol, or owner of 20% or more	partners; partnership of their voting secu	os of which you are rities; and any mana	a general partr aging agent, inc	er; corporations of luding one for a
	No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
3.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosign No		ents or transfer an	y property on acc	count of a deb	t that benefited an
	Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t Include credi	his payment tor's name
Pai	t 4: Identify Legal Actions, Repossessions	s, and Foreclosures				
	List all such matters, including personal injury cannot contract disputes. No Yes. Fill in the details.			,, ,		
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupto. Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		ty repossessed, fo	reclosed, garnisho	ed, attached, s	eized, or levied?
	Creditor Name and Address	Describe the Property Explain what happened		Date		Value of the property
11	Within 90 days before you filed for bankrupt		ding a bank or fina	noial institution	ot off any am	ounts from your
	accounts or refuse to make a payment beca No Yes. Fill in the details.		unig a bank or ima	noiai mstitution, s	set on any and	ounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a taken	action was	Amount
12.	Within 1 year before you filed for bankruptc court-appointed receiver, a custodian, or an		ty in the possessio	n of an assignee	for the benefit	of creditors, a
	■ No □ Yes					

Part !	5: List Certain Gifts and Contribution	s		
	Nithin 2 years before you filed for bankru No Yes. Fill in the details for each gift.	uptcy, did you give any gifts with a total value of more th	an \$600 per person?	
-	Gifts with a total value of more than \$60 person	0 per Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
	No	uptcy, did you give any gifts or contributions with a total	value of more than \$6	600 to any charity?
	Yes. Fill in the details for each gift or co	ontribution.		
1	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	ŕ	Dates you contributed	Value
Part (6: List Certain Losses			
	or gambling? ■ No □ Yes. Fill in the details. Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending	Date of your loss	Value of property lost
Part	7: List Certain Payments or Transfers	insurance claims on line 33 of Schedule A/B: Property.		
С	consulted about seeking bankruptcy or p	ptcy, did you or anyone else acting on your behalf pay or preparing a bankruptcy petition? eparers, or credit counseling agencies for services required in		to anyone you
	□ No			
	Yes. Fill in the details.			
I	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Bankruptcy Law Group, PC 1851 Heritage Ln Ste 298 Sacramento, CA 95815-4923	Attorney Fees: \$0.00, \$1,700 balance will be paid post-filing Court Fee: \$335 Costs: \$100 (Credit Report & Education Courses)		\$435.00
р		ptcy, did you or anyone else acting on your behalf pay or litors or to make payments to your creditors? you listed on line 16.	r transfer any property	to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Owner's Name

Yes. Fill in the details.

Address (Number, Street, City, State and ZIP Code)

Where is the property? (Number, Street, City, State and ZIP Code)

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 5

No. None of the above applies. Go to Part 12.

 $\ \square$ Yes. Check all that apply above and fill in the details below for each business.

Business Name
Address
(Number, Street, City, State and ZIP Code)

Describe the nature of the business
Name of accountant or bookkeeper

Employer Identification number Do not include Social Security number or ITIN.

Dates business existed

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

■ No
□ Yes Fill in the details below

☐ Yes. Fill in the details below.
Name

Address (Number, Street, City, State and ZIP Code) Date Issued

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

Official Form 107

Debtor 1 Mayfield, Stanl	ey	Case number (if known)
Stanley Mayfield	n fines up to \$250,000, or imprisonment for up to 20 years, and 3571.	or both.
Stanley Mayfield Signature of Debtor 1	Signature of Debtor 2	
4/4/2016		
Date	Date	
Did you attach additional pag ■ No □ Yes	ges to Your Statement of Financial Affairs for Individuals F	iling for Bankruptcy (Official Form 107)?
Did you pay or agree to pay s	someone who is not an attorney to help you fill out bankru	ptcy forms?
☐ Yes. Name of Person	Attach the Bankruptcy Petition Preparer's Notice, Declaration	n, and Signature (Official Form 119).

Fill in this ii	nformation to identify your case:			eck or 2A-1S		irected in this form and	in Form
Debtor 1	Stanley Mayfield			27-10	ирр.		
Debtor 2 (Spouse, if filin	ng)		_ י	1	here is no presi	umption of abuse	
(Eastern District o	f California		□ 2. ⁻	he calculation to	o determine if a presun	nption of abuse
United Stat	tes Bankruptcy Court for the: Sacramento Divis	,	_			nade under <i>Chapter 7 M</i> cial Form 122A-2).	leans Test
Case numb	per		_	□ 3. 7	he Means Test	does not apply now bed	ause of qualified
(if known)					military service b	out it could apply later.	
				☐ Cł	eck if this is a	n amended filing	
Official	Form 122A - 1						
Chapte	er 7 Statement of Your Cu	rent Mont	thly Inc	om	е		12/1
a separate sl number (if kı	ete and accurate as possible. If two married people inheet to this form. Include the line number to which thown). If you believe that you are exempted from a pice, complete and file Statement of Exemption from Calculate Your Current Monthly Income	ne additional inform resumption of abus	ation applies. se because you	On the	top of any addition to the top of any addition to the top of any addition to the top of	ional pages, write your r consumer debts or beca	name and case luse of qualifying
1. What	is your marital and filing status? Check one or	ıly.					
■ No	ot married. Fill out Column A, lines 2-11.						
□ма	arried and your spouse is filing with you. Fill ou	it both Columns A	and B, lines 2	2-11.			
□ма	arried and your spouse is NOT filing with you.	You and your spo	ouse are:				
	Living in the same household and are not lega	Ily separated. Fill	out both Colu	ımns /	A and B, lines 2-	11.	
	Living separately or are legally separated. Fill penalty of perjury that you and your spouse are legapart for reasons that do not include evading the N	gally separated und	er nonbankrup	otcy la	w that applies or		
101(10A) 6 months	e average monthly income that you received from all . For example, if you are filing on September 15, the 6-n , add the income for all 6 months and divide the total by tame rental property, put the income from that property i	nonth period would be 6. Fill in the result. D	e March 1 throu o not include ar	gh Aug ny inco	just 31. If the amore to	unt of your monthly incom han once. For example, if	e varied during the
				Colu. Debt		Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime, I deductions).	and commissions	(before all	\$	5,477.16	\$	
Colun	ony and maintenance payments. Do not include nn B is filled in.	. ,		\$	0.00	\$	
of you from a roomr	nounts from any source which are regularly pa u or your dependents, including child support. an unmarried partner, members of your household, mates. Include regular contributions from a spous at include payments you listed on line 3	Include regular co	ontributions	·. \$	0.00	\$	
5. Net in	acome from operating a business, profession,						
		Debto	or 1				
	receipts (before all deductions)	\$ 0.00					
	ary and necessary operating expenses	-\$ 0.00	0	Φ.	0.00	Ф	
	nonthly income from a business, profession, or far	m \$0.00_ (Copy here ->	⁵ —	0.00	\$	
6. Net in	ncome from rental and other real property	Dalite	or 1				
_		Debto	or 1				
	receipts (before all deductions)	\$ <u>0.00</u> -\$ 0.00					
	ary and necessary operating expenses		Camu kana	¢.	0.00	¢.	
Net m	onthly income from rental or other real property	\$ 0.00	Copy here ->	Ф	0.00	\$	

Official Form 122A-1

7. Interest, dividends, and royalties

0.00

Mayfield, Stanley Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit 0.00 under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 Total amounts from separate pages, if any. 0.00 \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 5,477.16 5,477.16 \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 5,477.16 **x** 12 Multiply by 12 (the number of months in a year) 65.725.92 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. CA Fill in the number of people in your household. 66.537.00 Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clebs office. 14. How do the lines compare? 14a Line 12b is less than or equal to line 13. On the top of page 1, check box 17, here is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below Βv nalty of perjury that the information on this statement and in any attachments is true and correct. Stanley Mayfie DF29F0BB45A74E2 Stanley Mayfield Date MM / DD / YYYY If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

Official Form 122A-1

Fill in this inform	ation to identify your o	ase:		
Debtor 1	Stanley Mayfield			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	skruptcy Court for the:	EASTERN DISTR DIVISION	ICT OF CALIFORNIA, SACRAMENTO	
Case number (if known)				Check if this is an amended filing
				_
Official For	m 108			
		n for Indiv	iduals Filing Under Chap	ter 7 12/15
Otatemen	it or intentio	TI TOT IIIGIV	riddais i iiiig Onder Ondp	12/15
	vidual filing under chap claims secured by you	-	out this form if:	
	ed personal property a		t expired.	
	er is earlier, unless the		ou file your bankruptcy petition or by the date se time for cause. You must also send copies to the	
•	ople are filing together e the form.	in a joint case, both	n are equally responsible for supplying correct in	oformation. Both debtors must sign
			needed, attach a separate sheet to this form. On t	the top of any additional pages,
write yo	ur name and case num	iber (if Known).		
Part 1: List Yo	ur Creditors Who Have	Secured Claims		
information bel	ow.		Creditors Who Have Claims Secured by Property	
Identify the cree	ditor and the property th	nat is collateral	What do you intend to do with the property that secures a debt?	at Did you claim the property as exempt on Schedule C?
	enlar Loan Admin & enlar)	Reporting	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
`	,		☐ Retain the property and enter into a <i>Reaffirmation</i>	■ Yes
Description of	3157 Staysail St, S CA 95833-4421	acramento,	Agreement.	
property securing debt:	CA 93033-4421		Retain the property and [explain]: Retain and pay pursuant to contract	
occurring door.			Retain and pay pursuant to contract	
Creditor's Na	avy Federal Credit U	Jnion	☐ Surrender the property.	■ No
name:	,		Retain the property and redeem it.	— NO
Description of	2013 Nissan Altim	a 2.5 4dr	Retain the property and enter into a <i>Reaffirmation</i>	on
property	Sedan (2.5L 4cyl C		Agreement. Retain the property and [explain]:	
securing debt:				
Part 2: List Yo	ur Unexpired Personal	Property Leases		
For any unexpired	d personal property lea	se that you listed in	n Schedule G: Executory Contracts and Unexpire	
			ired leases are leases that are still in effect; the leastee does not assume it. 11 U.S.C. § 365(p)(2).	ease period has not yet ended. You
Describe your un	nexpired personal prop	erty leases		Will the lease be assumed?
,				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Debtor 1 Mayfield, Stanley	Case number (if known)
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any pro	perty of my estate that secures a debt and any personal
proper Docusigned by: ired lease.	
X Stanley Mayfield X	ure of Debtor 2
Signature of Debtor 1	310 01 D00101 E
4/4/2016	
Date Date	

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of California, Sacramento Division

In re	Mayfield, Stanley		Case N	0.	
		Debtor(s)	Chapte	7	
	DISCLOSURE OF COMI	PENSATION OF ATTO	RNEY FOR	DEBTOR	
C	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fee rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy	, or agreed to be	paid to me, for serv	
	For legal services, I have agreed to accept		\$	1,700.00	
	Prior to the filing of this statement I have receive	ed	\$	0.00	
	Balance Due		\$	1,700.00	
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
i. I	I have not agreed to share the above-disclosed confirm.	mpensation with any other persor	n unless they are r	nembers and associ	iates of my law
[I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the				of my law firm. A
5. I	n return for the above-disclosed fee, I have agreed to	render legal service for all aspec	ets of the bankrup	tcy case, including:	
b c.	Analysis of the debtor's financial situation, and rer Preparation and filing of any petition, schedules, s Representation of the debtor at the meeting of cred [Other provisions as needed]	tatement of affairs and plan whic	h may be required	l;	n bankruptcy;
б. В	y agreement with the debtor(s), the above-disclosed Motions such as motion to redeem an			affirmation hear	ing
		CERTIFICATION			
I this ba	certify that the foregoing is a complete statement of inkruptcy proceeding.	f .	or payment to me	for representation of	of the debtor(s) in
4	/4/2016	Paul Bains			
Do	nte	Pauldeep Bains			
		Signature of Attorne Bankruptcy Law			
		1851 Heritage Ln	Ste 298		
		Sacramento, CA (916) 678-5000 F		260	
		paulb@bankrupt		200	
		Name of law firm			

1 2 3 4 5 6 7 8	BANKRUPTCY LAW Chad M. Johnson, SB Pauldeep Bains, SBN 1851 Heritage Lane, S Sacramento, CA 9581 Tel: 916-678-5000 Fax: 888-843-7260 PaulB@BankruptcyLo Attorneys for Debtor(s Stanley Mayfield	N: 232417 : 268004 Suite 298 .5 G.com	TED STATES BANKRUPTCY COURT ERN DISTRICT COURT OF CALIFORNIA
9			
10	In re: Stanley Mayfield		Case No: 16-22134 Chapter: 7
11		Debtor(s).	
12		Deolor(s),	DEBTOR'S DECLARATION REGARDING SIGNING THE FILED PETITION
13			Judge: Honorable Robert S. Bardwil
14			
15	I, Stanley Mayfield, th	ne Debtor in	this case, hereby declare under penalty of perjury under the laws of
16	the State of California	the following	ng:
17	1. I have	personal kno	owledge of the facts and statements made in this declaration, and am
18	willing and competent	t to testify th	ereto if called upon to do so.
19			e State of California, and I am the Debtor in the above-referenced
20			b state of Camorina, and I am the Debtor in the apove-referenced
21	Chapter 7 bankruptcy.		
22	3. On Ma	y 30, 2016,	I received an email from Chad Johnson, an attorney with Bankruptcy
23	Law Group, with a dra	aft of my pet	tition and supporting documents, which had been prepared for my
24	review. I reviewed the	petition and	d supporting documents.
25	4. On Apr	ril 1, 2016, a	at 5:30 PM, I had a phone meeting with Pauldeep Bains of
26 27	ĺ		gether we went through my petition draft and supporting documents
28	page by page.		

1	5.	Mr. Bains clearly explained to me the contents of every page to my full understanding	ıg.
2	6.	Through the review of the draft, Mr. Bains and I discussed any updates and changes	
3	which need	ed to be made in order to ensure the complete accuracy of my filing.	
4	7.	Mr. Bains confirmed with me each addition and/or correction that was being made to)
5	the draft, w	hich I was able to verify.	
6 7	8.	Mr. Bains explained that the final draft of the documents could be sent to me to sign	
8	through Do	cuSign and I agreed to this process. I had already used this process to sign the fee	
9	agreement a	and found it to be a secure and convenient way for me to sign documents.	
10	9.	On April 4, 2016, I received an email from Chad Johnson of Bankruptcy Law Group) ,
11	with a Docu	Sign link to the final draft of my petition. I clicked on the link.	
12 13	10.	I first went to the Verification of Master Address. Everything contained in the	
14	Verification	of Master Address was true and correct. I had a full and complete understanding of who	at I
15	was signing	. There was a "Sign Here" button on the signature line which I clicked in order to have a	my
16	signature pl	aced on that line. I was able to see my signature on the Verification of Master Address	
17	page and fu	lly intended that to be adopted as my actual signature for this page.	
18 19	11.	I then went to the Statement of Social Security page. Everything contained in the	
20	Statement of	f Social Security was true and correct. I had a full and complete understanding of what I	(
21	was signing	and was given the option to click to sign that page. I clicked the "Sign Here" button on	the
22	signature lin	ne for the Statement of Social Security Page and saw my signature placed on the signature	re
23	line. I fully	intended that to be adopted as my actual signature for this page.	
24	12.	I then went to the Voluntary Petition. Everything contained in the Voluntary Petition	I
25 26	was true and	correct. I had a full and complete understanding of what I was signing and was given the	he
27	option to cli	ck to sign on the signature line on page 6. I clicked the "Sign Here" button on the	
28			

signature line for the Voluntary Petition and saw my signature placed on the signature line. I fully intended that to be adopted as my actual signature for this page.

- 13. I then went to the schedules. Everything contained in the schedules was true and correct. I had a full and complete understanding of what I was signing and was given the option to click to sign the Declaration About an Individual Debtor's Schedules. I clicked the "Sign Here" button on the signature line for the Declaration About an Individual Debtor's Schedules and saw my signature placed on the signature line. I fully intended that to be adopted as my actual signature for this page.
- I then went to the Statement of Financial Affairs for Individuals Filing for Bankruptcy. Everything contained in the Statement of Financial Affairs for Individuals Filing for Bankruptcy was true and correct. I had a full and complete understanding of what I was signing and was given the option to click to sign on the signature line on page 7. I clicked the "Sign Here" button on the signature line for page 7 of Statement of Financial Affairs for Individuals Filing for Bankruptcy and saw my signature placed on the signature line. I fully intended that to be adopted as my actual signature for this page.
- 15. I then went to the Chapter 7 Statement of Your Current Monthly Income. Everything contained in the Chapter 7 Statement of Your Current Monthly Income was true and correct. I had a full and complete understanding of what I was signing and was given the option to click to sign on the signature line on page 2. I clicked the "Sign Here" button on the signature line for page 2 of Chapter 7 Statement of Your Current Monthly Income and saw my signature placed on the signature line. I fully intended that to be adopted as my actual signature for this page.
- 16. I then went to my Statement of Intention for Individuals Filing Under Chapter 7.

 Everything contained in the Statement of Intention for Individuals Filing Under Chapter 7 was true and correct. I had a full and complete understanding of what I was signing and was given the option to click to sign on the signature line on page 2. I clicked the "Sign Here" button on the signature line for

1	page 2 of St	atement of Intention for Individuals Filing Under Chapter 7 and saw my signature placed
2	on the signa	ture line. I fully intended that to be adopted as my actual signature for this page.
3	17.	After I signed each of the pages individually, I was able to complete the signing session
4	and I receiv	ed an email with a copy of all the signed documents prior to them being filed with the
5	court.	
6	18.	I have again, during the preparation of this declaration, reviewed each of the pages and
7 8	the signatur	es which I placed on each of the signature lines and again submit that I at all times
9	intended an	d expected those to be adopted and treated as my signatures.
10	19.	I have again signed, now with pen, each of those signature pages in order to again attest
11 12	my intent th	at my signatures from April 4, 2016, be treated and adopted as my actual signatures.
13	I, St	anley Mayfield, declare under penalty of perjury under the laws of California that the
14	foregoing is	true and correct.
15		
16		A Turbull and to Col I was
17	DATE:	Stanley Mayfield, Dedlarant
18		The state of the s
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